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ABSTRACT

This report presents the first results from the 1995 National Household Survey on Drug Abuse, an annual survey conducted by the Substance Abuse and Mental Health Services Administration. The survey provides estimates of the prevalence of use of a variety of illicit drugs, alcohol, and tobacco, based on a nationally representative sample of the civilian noninstitutionalized population aged 12 and older. In 1995, 17,747 people were interviewed for the survey. An estimated 12.8 million Americans were current illicit drug users, a figure that represents no change from the 1994 level, but which is lower than the 1979 high when the number was 25 million. Significant increases in past month marijuana and hallucinogen use occurred among youth between 1994 and 1995. In 1995, 52% of the population had used alcohol in the past month, but there were no changes in the rate of alcohol use between 1994 and 1995. An estimated 61 million Americans were current smokers in 1995, a smoking rate of 29%. Five appendixes discuss survey methodology and data and present references and detailed tables. (Contains 12 figures, 41 tables, and 58 references.) (SLD)

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ED 403 334

SAMHSA *Substance Abuse and Mental Health Services Administration*
Office of Applied Studies

Advance Report Number 18 **August 1996**

PRELIMINARY ESTIMATES FROM THE 1995 NATIONAL HOUSEHOLD SURVEY ON DRUG ABUSE

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Table of Contents

1. Highlights 2

2. Introduction 4

   Summary of NHSDA Methodology

   Revised NHSDA Methodology in 1995 and 1995

   Adjustment of 1985-1993 NHSDA Estimates

   Format of Report and Explanation of Tables

   Other NHSDA Reports

3. Any Illicit Drug Use 10

4. Marijuana and Hashish Use 16

5. Cocaine Use 17

6. Other Illicit Drug Use 19

7. Alcohol Use 20

8. Tobacco Use 23

9. Trends in Initiation of Use 25

10. Women of Childbearing Age 28

11. Discussion of Results 30

Appendices:

Appendix 1: Description of the Survey 32
Appendix 2: Limitations of the Data 34
Appendix 3: Other Sources of Data 41
Appendix 4: References 45
Appendix 5: Detailed Tables 51

1. HIGHLIGHTS

This report presents the first results from the 1995 National Household Survey on Drug Abuse, an annual survey conducted by SAMHSA. The survey provides estimates of the prevalence of use of a variety of illicit drugs, alcohol, and tobacco, based on a nationally representative sample of the civilian noninstitutionalized population age 12 and older. In 1995, a sample of 17,747 persons were interviewed for the survey. Selected findings are given below:

Illicit Drug Use

- In 1995, an estimated 12.8 million Americans were current illicit drug users, meaning they had used an illicit drug in the month prior to interview. This represents no change from 1994 when the estimate was 12.6 million. The number of illicit drug users was at its highest level in 1979 when there were 25 million.

- Between 1994 and 1995, there was a continuing increase in the rate of past month illicit drug use among youths, from 8.2 percent to 10.9 percent. The rate has doubled since 1992.

- Significant increases in past month marijuana use (from 6.0 percent to 8.2 percent), cocaine use (from 0.3 percent to 0.8 percent), and hallucinogen use (from 1.1 percent to 1.7 percent) occurred among youth between 1994 and 1995.

- The overall number of current cocaine users did not change significantly between 1994 and 1995 (1.38 million in 1994 and 1.45 million in 1995). This is down from a peak of 5.7 million in 1985.

- There were an estimated 582,000 (0.3 percent of the population) frequent cocaine users in 1995. Frequent use, defined as use on 51 or more days during the past year, was not significantly different than in 1994 (734,000) or 1985 (781,000). However, the estimated number of occasional cocaine users (people who used in the past year but on fewer than 12 days) has sharply declined from 7.1 million in 1985 to 2.5 million in 1995.

- There were an estimated 2.3 million people who started using marijuana in 1994. The annual number of marijuana initiates has risen since 1991.

- Despite the substantial reduction in cocaine use since 1985, there were still an estimated 530,000 Americans who used cocaine for the first time in 1994.

Alcohol Use

- In 1995, 111 million Americans age 12 and older had used alcohol in the past month (52 percent of the population). About 32 million engaged in binge drinking (5 or more drinks on at least one occasion in the past month) and about 11 million were heavy drinkers (drinking five or more drinks per occasion on 5 or more days in the past 30 days).

- There were no changes in rates of alcohol use between 1994 and 1995.

- About 10 million current drinkers were under age 21 in 1995. Of these, 4.4 million were binge drinkers, including 1.7 million heavy drinkers.

Cigarette Use

- An estimated 61 million Americans were current smokers in 1995. This represents a smoking rate of 29 percent. Current cigarette smoking did not change between 1994 and 1995.

- Among youths age 12-17, rates of smoking did not change between 1994 and 1995. An estimated 20 percent of youths age 12-17 (4.5 million adolescents) were current smokers in 1995.

- Current smokers are more likely to be heavy drinkers and illicit drug users than nonsmokers. Among smokers in 1995, 12.6 percent were heavy drinkers and 13.6 percent were illicit drug users. Among nonsmokers, 2.7 percent were heavy drinkers and 3.0 percent were illicit drug users.

- In 1994, about 1.5 million Americans first became daily smokers. The estimated number of new smokers per year has remained steady since the 1980's.

Women of Childbearing Age

- Overall, 7.3 percent (4.3 million) of women age 15-44 in 1995 had used an illicit drug in the past month. The corresponding rate for men age 15-44 was 11.6 percent.

- Of the 4.3 million women age 15-44 who were current illicit drug users in 1995, more than 1.6 million had children living with them, including 390,000 with at least one child under 2 years of age.

- Among women age 15-44 with no children and who were not pregnant, 9.3 percent were current illicit drug users. Only 2.3 percent of pregnant women were current drug users, which suggests that most women may reduce their drug use when they become pregnant. However, women who recently gave birth (have a child under 2 years old, and not pregnant) had a rate of use of 5.5 percent, suggesting that many women resume their drug use after giving birth.

2. INTRODUCTION

This report contains 1995 preliminary national estimates of rates of use, numbers of users, and other measures related to illicit drugs, alcohol, cigarettes, and smokeless tobacco. These estimates are from the National Household Survey on Drug Abuse (NHSDA), an ongoing survey of the civilian noninstitutionalized population of the United States, 12 years old and older.

Summary of NHSDA Methodology

The National Household Survey on Drug Abuse is the primary source of statistical information on the use of illegal drugs by the United States population. Conducted by the Federal Government since 1971, the survey collects data by administering questionnaires to a representative sample of the population at their place of residence. Since October 1, 1992 the survey has been supported and directed by the Substance Abuse and Mental Health Services Administration (SAMHSA).

The survey covers residents of households, noninstitutional group quarters (e.g., shelters, rooming houses, dormitories), and civilians living on military bases. Persons excluded from the universe include the homeless who never use shelters, active military personnel, and residents of institutional group quarters, such as jails and hospitals. Appendix 3 describes surveys that cover populations not included in the NHSDA sampling frame.

The 1995 NHSDA employed a multistage area probability sample of 17,747 persons interviewed from January through December 1995. The screening and interview response rates were 94.2 percent and 80.6 percent, respectively. The sample design incorporated the oversampling of blacks, Hispanics, and young people, to improve the accuracy of estimates for those populations.

The household interview takes about an hour to complete and incorporates procedures designed to maximize honest reporting of illicit drug use (e.g., the use of self-administered answer sheets). Data are collected on the recency and frequency of use of various licit and illicit drugs, opinions about drugs, problems associated with drug use, and drug abuse treatment experience. Also collected are data on demographic characteristics, employment, education, income, health status, mental problems, health insurance, utilization of services, and access to health care.

In some years, other agencies co-sponsor the NHSDA to support the collection of information on special topics. In 1994, the Department of Agriculture funded a supplemental rural sample (SAMHSA 1996a), and the Department of Labor funded a module of questions on workplace issues related to substance abuse.

In 1994, the survey questionnaire and editing procedures underwent major changes that may have affected the reporting of substance use. These changes

were implemented to improve the measurement of trends, reduce data processing time, and improve the overall quality of data essential to policymakers at all levels of government. A description of the revised methodology is given in the next section.

Because the new methodology affected the levels of substance use reported by respondents and, therefore, the estimates of prevalence, many previously published estimates for the survey years prior to 1994 are not comparable to the estimates for 1994 and 1995. To account for these methodological effects, an adjustment procedure was developed and applied to data for years prior to 1994 presented in this report.

Revised NHSDA Methodology in 1994 and 1995

SAMHSA, and previously the National Institute on Drug and Abuse (NIDA), have invested substantial resources over the years to improve and refine the NHSDA in order to enhance accurate measurement of substance use and related problems for use in policymaking. Toward this end, a series of studies was conducted during 1988-1992 to evaluate the survey methodology (Turner, Lessler, and Gfroerer 1992). These studies identified a number of potential improvements to the NHSDA questionnaire. Based on these studies, and consultations with drug survey researchers and data users, an improved instrument was developed, tested, and fielded in 1994. Major improvements in the new questionnaire are:

- A new core-supplement structure facilitates the addition or deletion of sets of questions concerning particular policy issues without affecting the measurement of trends in substance use prevalence. This structure also provides for a more consistent measurement of prevalence over time by designating a set of "core" items or questions on the recency and frequency of substance use to be administered the same way every year.

- Tobacco questions are asked using a self-administered answer sheet to enhance privacy and improve the reporting of tobacco use, particularly for youths.

- Questions are reworded to eliminate vague terms and enhance consistency across different sections of the questionnaire.

- A simplified, easier to understand definition of nonmedical use of prescription-type drugs is used.

- A calendar is provided during the interview to help the respondent focus on reference periods, improving accuracy when answering recency of drug use questions.

In addition to these questionnaire improvements, new procedures for editing drug use data were implemented in 1994. The new editing procedures use only designated core items to determine substance use prevalence. The consistent use of these editing procedures each year ensures more reliable trend measurement.

When the new questionnaire was introduced in 1994, a supplemental sample was selected for use with the old methodology (i.e., identical to 1993). This provided the capability to assess the impact of the new questionnaire and to measure the effects of the change in methodology. Analyses of the 1994 data have shown that the improvements had a minimal effect on some estimates, but the effect on others was substantial. A separate SAMHSA report provides details on the development of the new questionnaire, editing methods, design of the sample, and the impact of the new methodology on substance use estimates (SAMHSA 1996b). A few key observations from this report are:

- Rates of missing data for key drug use variables are lower with the 1994-B (new) questionnaire, indicating improved reliability with the new questionnaire.
- The new methodology has a minimal effect on estimates of past month use of most illicit drugs.
- Estimates of past year and lifetime use of illicit drugs are slightly lower under the new methodology, primarily because of the revised editing procedures.
- Estimates of alcohol use are slightly higher under the new methodology.
- Estimates of tobacco use are substantially higher under the new methodology, especially for young people. This is probably due to the use of a self-administered answer sheet for tobacco questions (previously interviewer-administered).

Adjustment of 1979-1993 Estimates

Because of the change in methodology in 1994, many of the estimates from the 1993 and earlier NHSDAs are not comparable to estimates from the 1994 and 1995 NHSDAs. Since it is important to describe long-term trends in drug use accurately, an adjustment procedure was developed and applied to the pre-1994 estimates. This adjustment uses the 1994 split sample design to estimate the magnitude of the impact of the new methodology for each drug category. To improve the precision of the adjustment used for low-prevalence drugs, data from the large 1993 sample were combined with the smaller 1994-A sample (both used the "old" questionnaire). Essentially, if the new methodology is estimated to produce a 20% higher prevalence rate for the use of a particular drug by a demographic group, then estimates based on the old methodology (for that drug) are adjusted upward by 20%. A more complete description of the adjustment method is given in Appendix 2.

Readers need to be aware that all 1979-93 data shown in this report are different from previously published NHSDA estimates for 1979-93. Because the adjustments were developed from sample survey data, they are subject to sampling error and, therefore, may in some cases introduce additional variation into trends. This is particularly true for estimates of rare behaviors and for small subgroups.

Format of the Report and Explanation of Tables

Summaries of the results of the 1995 NHSDA are presented for several categories of drugs. For each drug category, recent trends in use and differences in use among population subgroups are described. An analysis of trends in the initiation of substance use and an analysis of drug use among women of childbearing age are contained in sections following the drug use prevalence analyses. A discussion of the NHSDA findings, including comparisons with other studies, is given at the end of the report. Technical appendices 1, 2 and 3 provide more detail on the NHSDA methodology, limitations of the data, and other sources of data. Appendix 4 provides a list of references related to the NHSDA, other substance abuse surveys, and survey methodology. Detailed tabulations of data from the NHSDA are provided in Appendix 5.

The tables and the analysis focus primarily on recent trends, from 1994 to 1995. Long term trends are also presented and discussed, but due to the limitations of the procedure used to adjust for the differences between the pre- and post-1994 methodology, it is not possible to analyze these data in as much detail. As indicated in the tables, statistical significance testing was done for comparisons between 1995 and prior years. Significance levels are indicated in the tables, and all changes described in the text as increases or decreases were tested and found to be significant at least at the .05 level, unless otherwise stated.

Tables and text present prevalence measures in terms of both the number of drug users and the rate of drug use in the population. Tables show estimates of drug use prevalence in lifetime (i.e., ever used), past year, and past month. The analysis focuses primarily on past month use, which is also referred to as "current use," although lifetime and past year data are also occasionally discussed.

Data are presented for three major race/ethnic groups: whites, blacks, and Hispanics. A fourth category, "Other," includes Asian and Pacific Islanders, American Indians and Alaskan Natives, and other groups. It should be noted that the category "white" includes only non-Hispanic whites, the category "black" includes only non-Hispanic blacks, and the category "Hispanic" includes Hispanics of any race.

Data are also presented for four U.S. geographic regions. These regions include the following groups of States:

Northeast - Maine, New Hampshire, Vermont, Massachusetts, Rhode Island, Connecticut, New York, New Jersey, Pennsylvania.

North Central - North Dakota, South Dakota, Nebraska, Kansas, Minnesota, Louisiana, Missouri, Wisconsin, Illinois, Michigan, Indiana, Ohio.

South - Texas, Oklahoma, Arkansas, Louisiana, Mississippi, Tennessee, Kentucky, West Virginia, Virginia, Maryland, Delaware, District of Columbia, North Carolina, South Carolina, Georgia, Florida, Alabama.

West - California, Oregon, Washington, Idaho, Nevada, Arizona, New Mexico, Utah, Colorado, Wyoming, Montana, Hawaii, Alaska.

The tables also present data by population density. For this variable, large metropolitan areas are defined as Metropolitan Statistical Areas (MSAs) with a population of 1 million or more. Small metropolitan areas are MSAs with a population of less than 1 million. Nonmetropolitan areas are areas outside of MSAs. For 1993 and 1994 NHSDA estimates, 1990 Census data and 1990 MSA classifications were used to determine population density. For 1992 estimates, 1990 Census counts and 1984 MSA classifications were used.

Other than presenting results by age group and other basic demographic characteristics, no attempt is made in this report to control for potentially confounding factors that might help explain the observed associations. This point is particularly salient with respect to race/ethnicity, which tends to be highly associated with socioeconomic characteristics. The cross-sectional nature of the data precludes any causal interpretations of observed relationships. Nevertheless, the data presented in this report are useful for indicating demographic subgroups with relatively high (or low) rates of drug use, regardless of what the underlying reasons for those differences might be. A previously published SAMHSA report includes a more in-depth analysis of the relationship between drug use, race/ethnicity, and socioeconomic status (SAMHSA 1993b). In this report, measures of socioeconomic status include employment and education. Personal and family income data are not available for analysis in this preliminary report, but will be addressed in a later report.

Other NHSDA Reports

"Population Estimates" and "Main Findings" for 1995 will be released during the next few months.

The Office of Applied Studies has also conducted more specialized, in-depth analyses using NHSDA data on specific substance abuse issues (see list of references in Appendix 4). Recent studies, based primarily on 1991-93 data, include:

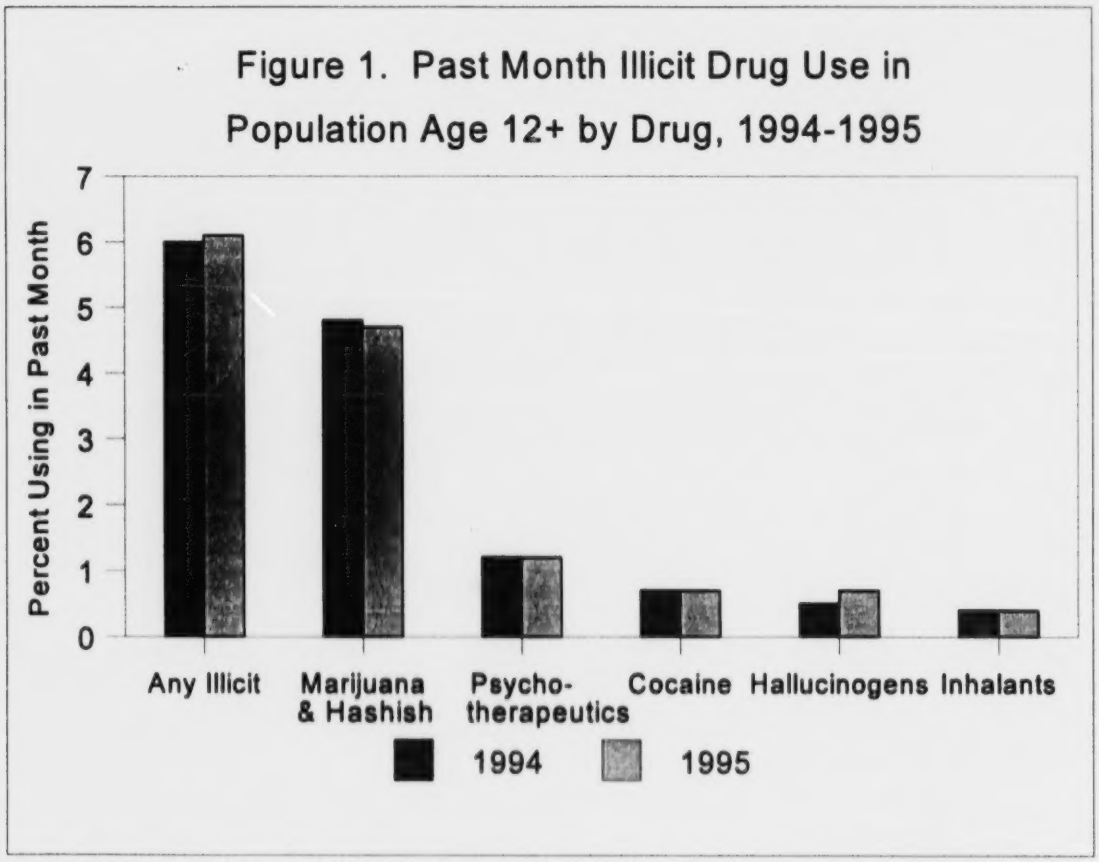
- ▲ Trends in the Incidence of Drug Use in the U.S., 1919-1992
- ▲ Drug Use Among U.S. Workers: Prevalence and Trends by Occupation and Industry Categories
- ▲ Substance Abuse in States and Metropolitan Areas: Model-Based Estimates from the 1991-1993 NHSDAs
- ▲ The Relationship Between Family Structure and Adolescent Substance Use
- ▲ Mental Health Estimates from the 1994 National Household Survey on Drug Abuse.

As mentioned above, a detailed report on the new NHSDA questionnaire is also available. A complete listing of previously published reports from the NHSDA and other data sources is available from the Office of Applied Studies. Many of these reports are also available through the Internet. In addition, OAS makes public use data files available to researchers. Currently, files are available from the 1979, 1982, 1985, 1988, 1990, 1991, 1992, 1993, and 1994 NHSDAs. The 1995 public use file will be available by January, 1997. Secondary analysis of these data can be supported through grants awarded by the Division of Epidemiology and Prevention Research, National Institute on Drug Abuse.

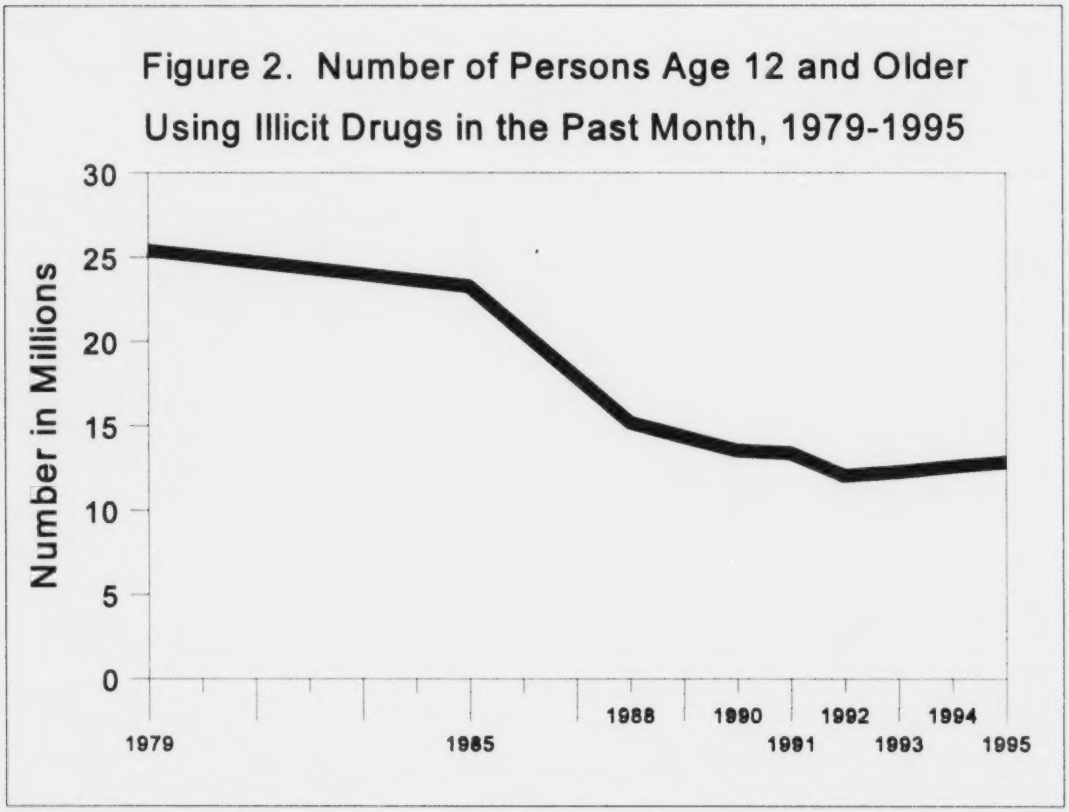
3. ANY ILLICIT DRUG USE

- In 1995, an estimated 12.8 million Americans were current illicit drug users, meaning they had used an illicit drug in the month prior to interview. This represents 6.1 percent of the population 12 years old and older.

- Marijuana is the most commonly used illicit drug, used by 77 percent of current illicit drug users (Figure 1). Approximately 57 percent of current illicit drug users used marijuana only, 20 percent used marijuana and another illicit drug, and the remaining 23 percent used only an illicit drug other than marijuana in the past month. An estimated 5.6 million Americans (2.6 percent of the population) were current users of illicit drugs other than marijuana and hashish.

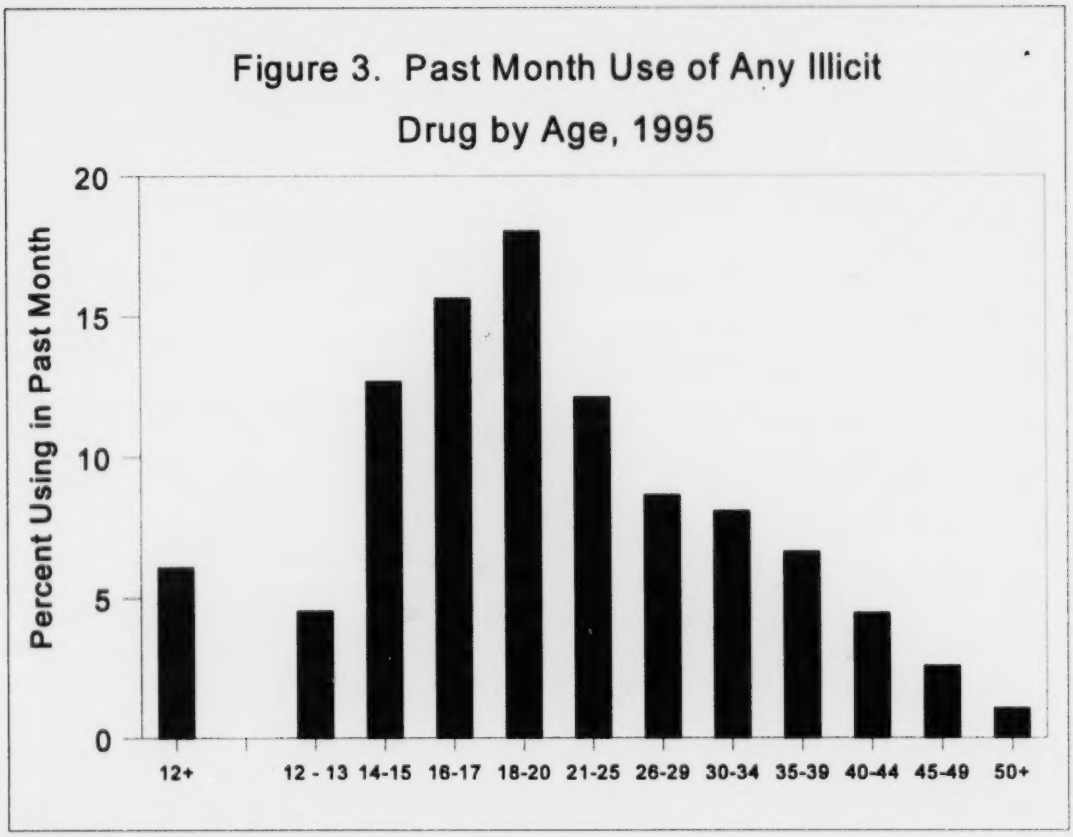


- The number of current illicit drug users did not change between 1994 and 1995 (12.6 and 12.8 million, respectively). The number of current illicit drug users was at its highest level in 1979 (25.4 million, 14.1 percent), declined until 1992 (12.0 million, 5.8 percent), and has remained at approximately the same level since then (Figure 2).



Age

- Rates of drug use show substantial variation by age. Among youths age 12-13, 4.5 percent were current illicit drug users. The highest rates were found among young people age 16-17 (15.6 percent) and age 18-20 (18.0 percent). Rates of use were lower in each successive age group, with only about one percent of persons age 50 and older reporting current illicit use (Figure 3).



- Nearly half of young adults age 21-25 had tried illicit drugs at least once in their lifetime, and 12 percent were current users. More than half of adults age 26-44 had tried illicit drugs, but rates of current use were only 8.3 percent for those age 26-34 and 5.6 percent for those age 35-44.

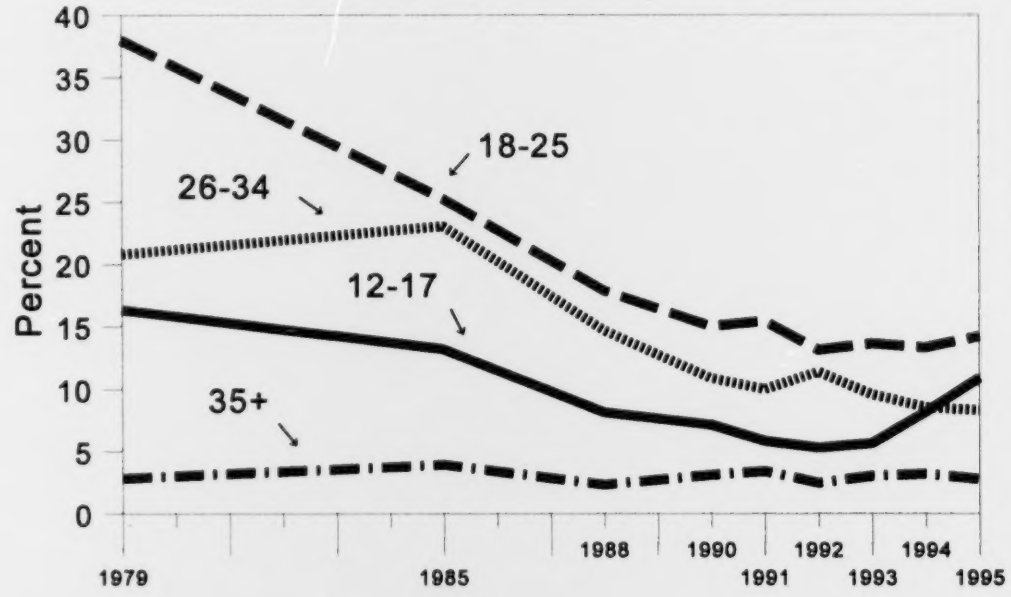
- In 1995, 27.1 percent of current illicit drug users were age 35 and older. This percentage increased from 1979, when 10.3 percent of illicit drug users were age 35 and older, until 1990, when the percentage was 26.1 percent.

- The percentage of adolescents (12-17 years old) using drugs increased between 1994 and 1995, continuing a trend that began in 1993. In 1992, the rate of past month use among youth age 12-17 reached a low of 5.3 percent, the result of a decline from 16.3 percent in 1979. By 1994 the rate had climbed back up to 8.2 percent, and in 1995 it increased again to 10.9 percent (Figure 4).

- Between 1994 and 1995, the percentage of adults reporting past month illicit drug use remained about the same. In 1995 the rates were 14.2 percent for persons age 18-25, 8.3 percent for those age 26-34, and 2.8 percent for those age 35 and older (Figure 4).

- In 1979, the peak year for illicit drug use, rates were 38.0 percent for those age18-25, 20.8 percent for those age 26-34, and 2.8 percent for persons age 35 and older (Figure 4).

Figure 4. Past Month Illicit Drug Use by Age: 1979-1995



- In general, the aging of people in the heavy drug using cohorts of the late 1970s, many of whom continue to use illicit drugs, has diminished any observable reductions in use among the 35+ group and has resulted in an overall shift in the age distribution of the population of illicit drug users. This shift in the age composition of drug users is also reflected in data from the Drug Abuse Warning Network (DAWN), which shows that visits by patients age 35 and older to hospital emergency rooms for drug related problems have increased in recent years (see Advance Report Number 17). For example, in 1985, 19 percent of cocaine-related episodes involved persons age 35 and older. By 1995, this percentage had increased to 43 percent.

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Race/ethnicity

- The rate of current illicit drug use for blacks (7.9 percent) remained somewhat higher than for whites (6.0 percent) and Hispanics (5.1 percent) in 1995. However, among youths the rates of use are about the same for the three groups.

- The rate of current illicit drug use for youths in "other" race/ethnicity groups increased from 2.7 percent to 11.2 percent between 1994 and 1995. This result should be viewed with caution, however, as the NHSDA sample size is small for this group. This racial/ethnic group is comprised mainly of Asian Americans, Pacific Islanders, and Native Americans.

- Most current illicit drug users were white. There were an estimated 9.6 million whites (75 percent of all users), 1.9 million blacks (15 percent), and 1.0 million Hispanics (8 percent) that were current illicit drug users in 1995.

- There were no significant changes in rates between 1994 and 1995 for any of the racial/ethnic groups. However, the recent (between 1992 and 1995) increase in illicit drug use among youths has occurred among white, black and Hispanic youths.

Gender

- As in 1994, men continued to have a higher rate of current illicit drug use than women (7.8 percent vs. 4.5 percent) in 1995.

Region/Urbanicity

- The current illicit drug use rate ranged from 7.8 percent in the West region to 4.9 percent in the Northeast.

- There was little difference in rates of use in large metropolitan areas, small metropolitan areas, and nonmetropolitan areas.

Education

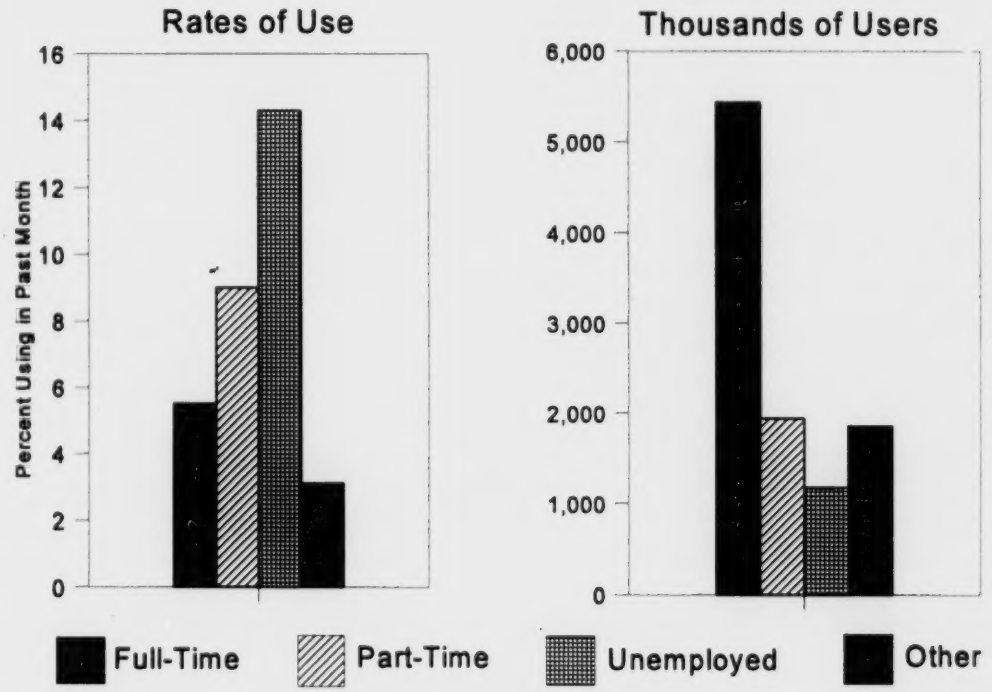
- Illicit drug use rates remain highly correlated with educational status. Among young adults age 18-34 years old in 1995, those who had not completed high school had the highest rate of use (15.4 percent), while college graduates had the lowest rate of use (5.9 percent). This is despite the fact that young adults at different educational levels are equally as likely to have tried illicit drugs in their lifetime (50 percent of those not completing high school and 52 percent of college graduates).

Employment

- Current employment status is also highly correlated with rates of illicit drug use, as 14.3 percent of unemployed adults (age 18 and older) were current illicit drug users in 1995, compared with 5.5 percent of full-time employed adults. The rate for full-time employed adults decreased significantly between 1994 (6.7 percent) and 1995 (5.5 percent) (Figure 5).

- Seventy-one percent of all current illicit drug users age 18 and older (7.4 million adults) were employed, including 5.4 million full-time workers and 1.9 million part-time workers.

Figure 5. Past Month Illicit Drug Use by Current Employment Status, 1995

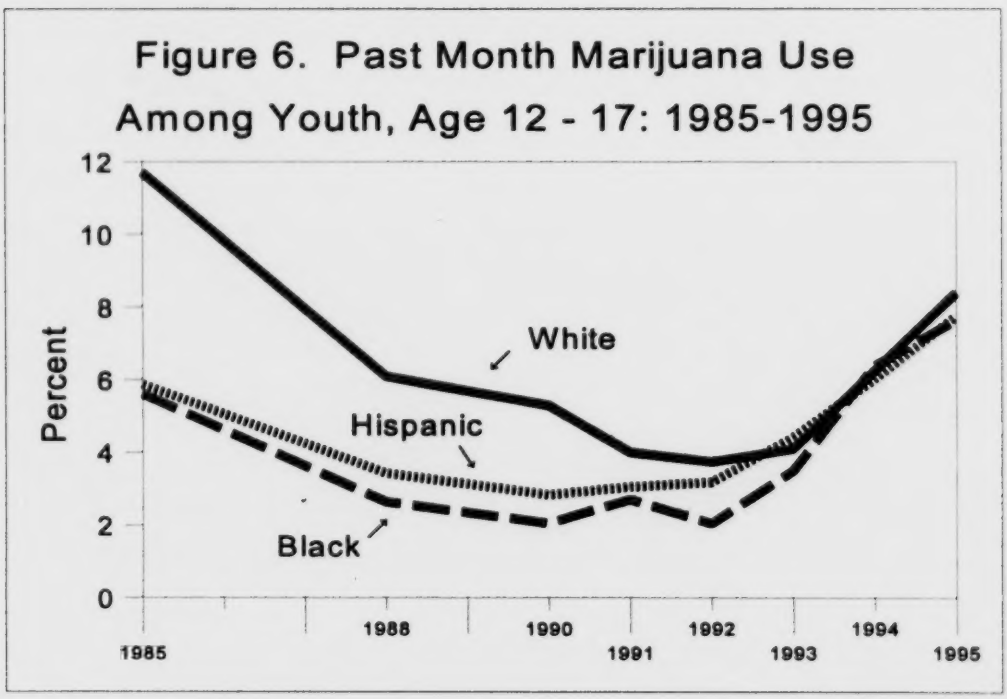


4. MARIJUANA AND HASHISH USE

- In 1995, an estimated 9.8 million Americans were current (past month) marijuana or hashish users. This represents 4.7 percent of the population aged 12 and older.

- Marijuana is by far the most prevalent drug used by illicit drug users since approximately three quarters (77 percent) of current illicit drug users were marijuana or hashish users in 1995. Because of this, trends and demographic differences are generally similar for any illicit use and marijuana/hashish use.

- Between 1994 and 1995 the rate of marijuana use among youths age 12-17 increased from 6.0 percent to 8.2 percent, continuing a trend that began during 1992-93. Since 1992, the rate of use among youth has more than doubled. Similar trends are evident among both boys and girls; among whites, blacks, and Hispanics; in all four geographic regions; and in metropolitan and nonmetropolitan areas (Figure 6).



- Frequent use of marijuana, defined as use on at least 51 days during the past year, remained unchanged from 1994 to 1995 at just over 5 million users (5.3 million, 2.5 percent of the population in 1995) but was significantly lower than in 1985, when there were an estimated 8.4 million frequent users (4.4 percent of the population).

5. COCAINE USE

- In 1995, an estimated 1.5 million Americans were current cocaine users. This represents 0.7 percent of the population aged 12 and older.

- The number of cocaine users did not change between 1994 and 1995 (1.4 million in 1994). It had declined from 5.7 million in 1985 (3.0 percent of the population) to 1.4 million (0.7 percent of the population) in 1992.

- There were an estimated 582,000 (0.3 percent of the population) frequent cocaine users in 1995. Frequent use, defined as use on 51 or more days during the past year, was not significantly different than in 1994, when there were an estimated 734,000 frequent cocaine users. Since this measure of frequent cocaine use was first estimated in 1985, no significant increases or decreases have been detected. It should be noted that these estimates are subject to large sampling error and potentially large nonsampling error.

- The estimated number of occasional cocaine users (people who used in the past year but on fewer than 12 days) was 2.5 million in 1995, similar to what it had been in 1994. The number of users was down significantly from 1985 when it was 7.1 million.

- The estimated number of current crack users was about 400,000 in 1995, and there have been no statistically significant changes since 1988.

Age

- As in the past, the rate of current cocaine use in 1995 was highest among those age 18-25 years old (1.3 percent) and age 26-34 years old (1.2 percent). Rates were 0.8 percent for youths age 12-17 years and 0.4 percent for adults age 35 and older. Except for youths, all of these rates were similar to rates in 1994.

- The past month cocaine use prevalence rate for the 12-17 year old age group increased from 0.3 percent in 1994 to 0.8 percent in 1995. Prior to 1994, the rate among youth had declined from 1.9 percent in 1982.

Race/Ethnicity

- Rates of cocaine use were 1.1 percent for blacks, 0.7 percent for Hispanics, and 0.6 percent for whites in 1995. There were no significant changes in rates for any racial/ethnic group between 1994 and 1995.

Gender

- Men continued to have a higher rate of current cocaine use than women (1.0 percent and 0.4 percent, respectively, in 1995). These rates were similar to rates in 1994.

Region/Urbanicity

- In 1995 the rate of current cocaine use was 0.7 percent in the West region, 0.5 in the Northeast region, 0.8 percent in the South region, and 0.7 percent in the North Central.

- There were no significant differences in rates between large metropolitan, small metropolitan, and nonmetropolitan areas (0.7 percent, 0.8 percent, and 0.5 percent, respectively).

Education

- Current cocaine use rates remained highly correlated with educational status. Among adults age 18 and older in 1995, those who had not completed high school had a current use rate of 1.2 percent. The rate was 0.8 percent among those with just a high school education, 0.6 percent among those with some college, and 0.2 percent among college graduates.

Employment

- 68 percent of all adult (age 18 and older) current cocaine users in 1995 were employed either full or part time. This reflects an estimated 0.7 million adult employed cocaine users.

- The rate of current cocaine use was highest among the unemployed, as 2.1 percent of unemployed adults were current cocaine users in 1995, compared with only 0.7 percent of employed adults.

6. OTHER ILLICIT DRUG USE

Prevalence rates for other illicit drugs are smaller and consequently more difficult to accurately measure. There were no major changes in the prevalence of the use of inhalants, heroin or non-medical use of psychotherapeutics between 1994 and 1995. However, a significant increase in hallucinogen use was seen, particularly among youths age 12-17, and a significant increase in the lifetime rate of heroin smoking was evident for the population 12 and older.

- Estimates of heroin use from the NHSDA are considered very conservative due to the probable undercoverage of the population of heroin users. Estimates of lifetime heroin prevalence have generally remained at around 2 million since 1979, and no significant changes in past year or past month prevalence have been detected. While the estimated number of current heroin users was 117,000 in 1994 and 196,000 in 1995, this is not a statistically significant change.

- The 1995 NHSDA estimated that 1.4 million people had smoked heroin in their lifetime. This estimate was about twice as large as the 1994 estimate. Although the change was statistically significant only for the 35-and-older age group, estimates for other age groups were also higher in 1995 than in 1994, including youths age 12-17.

- The rate of current use of hallucinogens increased between 1994 and 1995 (0.5 percent in 1994 and 0.7 percent in 1995). Among youth age 12-17, the rate increased from 1.1 percent to 1.7 percent.

- For inhalants, the overall rate of past month use was 0.4 percent in both 1994 and 1995.

- The estimated prevalence rate of nonmedical use of psychotherapeutics (tranquilizers, sedatives, analgesics, or stimulants) in the past month was 1.2 percent in both 1994 and 1995.

- The estimated number of persons who have tried methamphetamine in their lifetime was 4.7 million (2.2 percent of the population) in 1995. In 1994, the estimate had been 3.8 million (1.8 percent). However, this change was not statistically significant.

7. ALCOHOL USE

Estimates of the prevalence of alcohol use are presented primarily for three levels of use, defined for this report as follows:

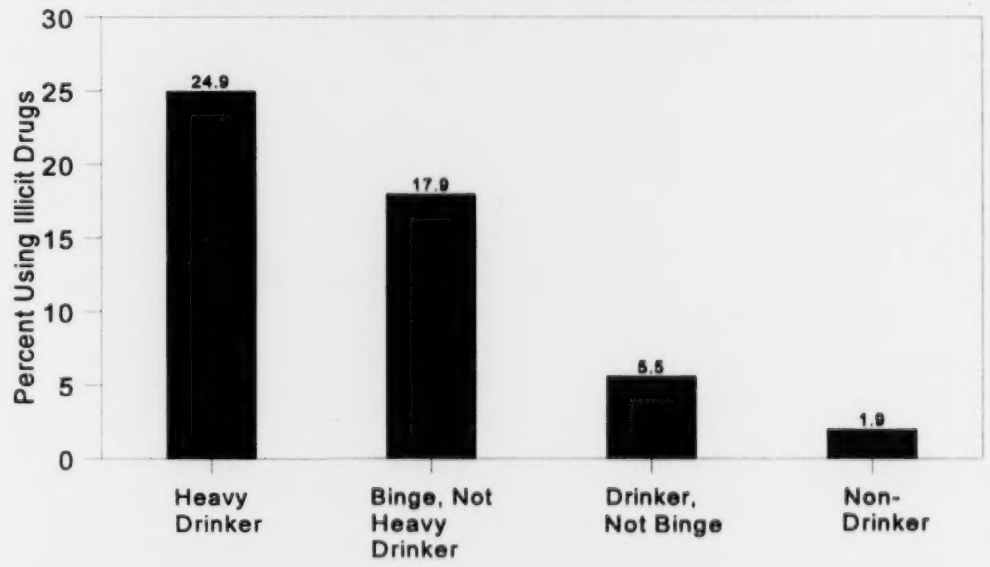
> Current - At least one drink in the past month (includes binge and heavy use).
> Binge use - Five or more drinks on the same occasion at least once in the past month (includes heavy use).
> Heavy use - Five or more drinks on the same occasion on at least five different days in the past month.

- In 1995, approximately 111 million persons age 12 and over were current alcohol users, which was about 52 percent of the total population age 12 and older. About 32 million persons (15.8 percent) engaged in binge drinking, and about 11 million Americans (5.5 percent of the population) were heavy drinkers.

- About 10 million current drinkers were under age 21 in 1995. Of these, 4.4 million were binge drinkers, including 1.7 million heavy drinkers.

- Alcohol usage rates were not significantly different between 1994 and 1995. This was true for all three measures of drinking.

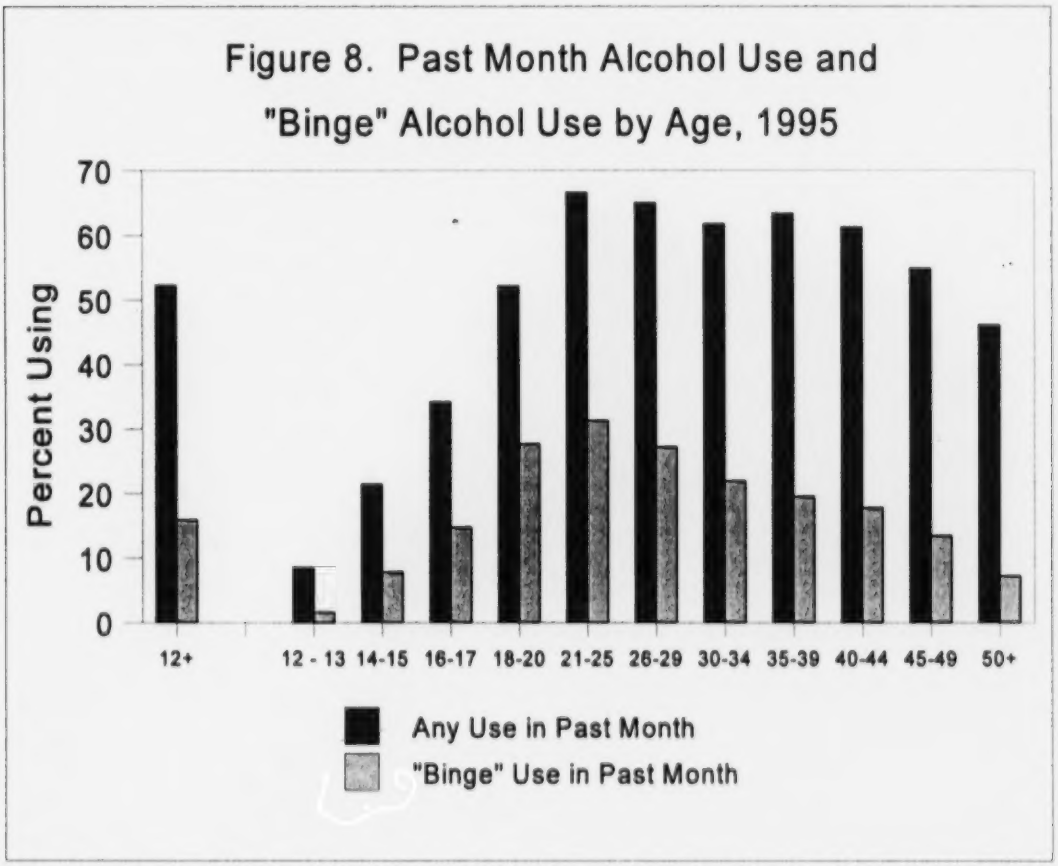
Figure 7. Past Month Illicit Drug Use, by Past Month Alcohol Use, Age 12+, 1995



- The level of alcohol use was strongly associated with illicit drug use in 1995, as in prior years. Of the 11.3 million heavy drinkers, 25 percent (2.8 million people) were current illicit drug users. Among binge (but not heavy) drinkers, 18 percent (3.8 million) were illicit drug users. Other drinkers (i.e., past month but not binge) had a rate of 5.5 percent (3.9 million) for illicit drug use, while only 1.9 percent (1.9 million) of nondrinkers were illicit drug users (Figure 7).

Age

- Rates of current alcohol use were above 60 percent for age groups 21-25, 26-29, 30-34, 35-39, and 40-44 in 1995. For younger and older age groups rates were lower. Young adult (18-25 years old) drinkers were the most likely to binge or drink heavily. About half of the drinkers in this age group were binge drinkers and about one in five were heavy drinkers (Figure 8).



Race/ethnicity

- In 1995, whites continued to have the highest rate of alcohol use at 56 percent. Rates for Hispanics and blacks were 45 percent and 41 percent, respectively. The rates of binge use was lower among blacks (11.2 percent) than among whites (16.6 percent) and Hispanics (17.2 percent). Heavy use showed no statistically significant differences by race/ethnicity (5.7 percent for whites, 6.3 percent for Hispanics, and 4.6 percent for blacks).

Gender

- Sixty percent of men were past month alcohol users, compared with 45 percent of women. Men were much more likely than women to be binge drinkers (23.8 percent and 8.5 percent, respectively) and heavy drinkers (9.4 and 2.0 percent, respectively).

Region/Urbanicity

- The rate of current alcohol use was 59 percent in the North Central region, 54 percent in the Northeast region, 53 percent in the West region, and 47 percent in the South in 1995. Rates of binge use were 20 percent in the North Central, 16 percent in the West, and 14 percent in the South and Northeast. Heavy alcohol use rates were 7.0 percent in the North Central, 5.6 percent in the West, 4.9 percent in Northeast and 4.8 percent in the South.

- The rate of past month alcohol use was 56 percent in large metropolitan areas, 52 percent in small metropolitan areas, and 46 percent in nonmetropolitan areas. There was little variation in binge and heavy alcohol use rates by population density.

Education

- In contrast to the pattern for illicit drugs, the higher the level of educational attainment, the more likely was the current use of alcohol. In 1995, 68 percent of adults with college degrees were current drinkers, compared with only 42 percent of those having less than a high school education. Binge alcohol use rates were similar across different levels of education. However, the rate of heavy alcohol use was 3.7 percent among adults who had completed college and 7.1 percent among adults who had not completed high school.

8. TOBACCO USE

- An estimated 61 million Americans were current smokers in 1995. This represents a smoking rate of 29 percent for the population age 12 and older. There was no change between 1994 and 1995 overall.

- Current smokers were more likely to be heavy drinkers and illicit drug users. Among smokers, the rate of heavy alcohol use (five or more drinks on five or more days in the past month) was 12.6 percent and the rate of current illicit drug use was 13.6 percent. Among nonsmokers, only 2.7 percent were heavy drinkers and 3.0 percent were illicit drug users.

- An estimated 6.9 million Americans (3.3 percent of the population) were current users of smokeless tobacco in 1995.

Age

- Approximately 4.5 million youths age 12-17 were current smokers in 1995. The rate of smoking among youths age 12-17 was 20 percent. The rate was 18.9 percent in 1994, but this does not represent a statistically significant change.

- Youths age 12-17 who smoked were about 8 times as likely to use illicit drugs and 11 times as likely to drink heavily as nonsmoking youths (Figure 9).

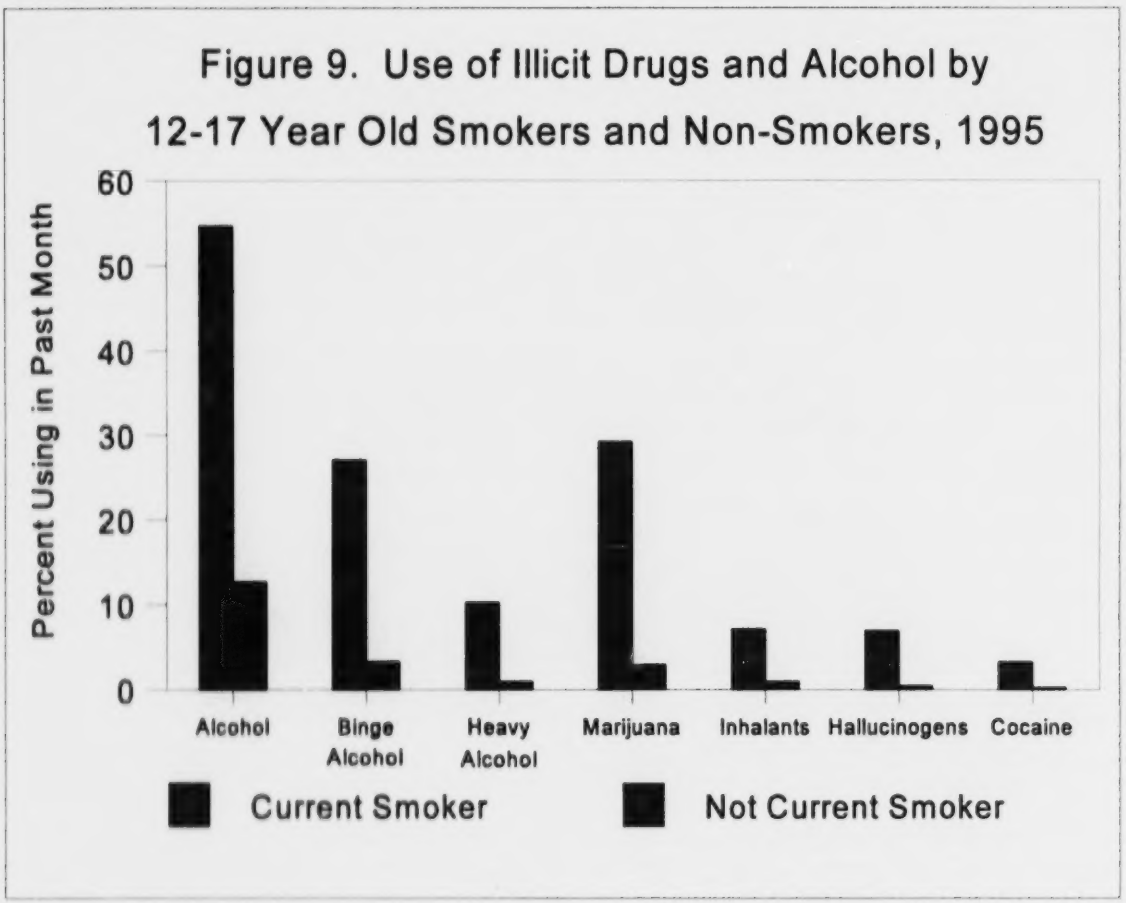
Race/ethnicity

- In 1995, no significant differences in smoking rates by race/ethnicity were found. Smokeless tobacco use was more prevalent among whites (3.9 percent) than among blacks (1.3 percent) or Hispanics (1.2 percent).

Gender

- Among adults, men had somewhat higher rates of smoking than women, but rates of smoking were similar for males and females aged 12-17.

- The rate of smokeless tobacco use was significantly higher for men than for women in 1995 (6.2 percent vs. 0.6 percent). Over 90 percent of smokeless tobacco users were men.



Region/Urbanicity

- The rate of current cigarette use was 32 percent in the North Central region, 29 percent in the South, 28 percent in the Northeast, and 26 percent in the West. The rate of smoking was 27 percent in large metropolitan areas, 28 percent in small metropolitan areas, and 33 percent in nonmetropolitan areas.

Education

- Level of educational attainment was correlated with tobacco usage. Thirty-seven percent of adults who had not completed high school smoked cigarettes, while only 17 percent of college graduates smoked.

9. TRENDS IN INITIATION OF DRUG USE

Estimates of drug use incidence, or initiation, provide another measure of the Nation's drug problem. They can suggest emerging patterns of use among young people. In the past, increases and decreases in incidence have usually been followed by corresponding changes in the prevalence of use. SAMHSA recently released a detailed report on incidence trends based on 1991-93 data, covering the period 1919 through 1992. Using the 1994 and 1995 NHSDA data, it is now possible to update those earlier estimates using the improved NHSDA questionnaire data, as well as develop estimates for 1993 and 1994.

Details of the methodology are available in Trends in the Incidence of Drug Use in the United States, 1919-1992, released earlier this year. Briefly, the estimates are based on the NHSDA questions on age at first use. Using each respondent's reported age at first use in conjunction with his/her age and interview date, the respondent's year of first use of each drug was determined by subtracting their age from the interview year and then adding the age at first use. By combining all respondents and applying sample weights, estimates of the number of new users of each drug for each year were made. These estimates include new users at any age, including under age 12. In addition, the average age of new users in each year and age-specific rates of first use were estimated. These rates are presented in this report as the number of new users per 1,000 person-years of exposure. The numerator of each rate is the number of persons in the age group who first used the drug in the year (times 1,000), while the denominator is the number of persons who were exposed to the risk of first use during the year, adjusted for their estimated exposure time in years. Persons who first used the drug in a prior year have zero risk of first use in the current year, and persons who still have never used the drug by the end of the current year had 1 year of exposure to risk. Persons who first used during the year are assumed to have a half year of exposure to risk.

The incidence estimates are based on retrospective reports of age at first drug use by survey respondents interviewed during 1994-95, and may therefore be subject to several biases, including bias due to differential mortality of users and nonusers of each drug, bias due to memory errors (recall decay and telescoping), and underreporting bias due to social acceptability and fear of disclosure. See Appendix 2, Section III for a discussion of these biases. As is explained in Appendix 2, it is likely that some of these biases, particularly telescoping and underreporting because of fear of disclosure, may be affecting estimates for the most recent years more significantly. Thus, estimates for these recent years (i.e., 1992-94) may be less stable than other estimates, and should be interpreted with caution.

Marijuana:

- An estimated 2.3 million Americans used marijuana for the first time in 1994. The number has been increasing since 1991, after a long-term decrease that had been occurring since 1975. It is interesting to note that the decrease in prevalence of marijuana use that occurred in the 1980s did not begin to occur until several years after the peak in incidence estimates. This suggests that unless there are changes in the factors that influence drug use behaviors, we should not expect decreases in prevalence to occur soon, since incidence was still rising in 1994. The rising incidence seems to be fueled largely by the increasing rate of new use among youths age 12-17 years (from 38 per 1,000 person years in 1991 to 74 per 1,000 person years in 1994). This is in contrast with the epidemic of the late 1960s and early 1970s, which involved increases among youths and young adults (Figure 10).

Figure 10. Age-specific Rates of First Marijuana Use: 1962-1994

Cocaine and Crack Cocaine:

- The annual number of new cocaine users remained stable from 1990 to 1994, but at a lower level than during the early 1980's. In 1994 there were an estimated 530,000 new users, while during 1980-1984 there had been about 1.3 million cocaine initiates per year. The rate of initiation by different age groups, however, has been changing. With the age group 18-25 showing a decrease in the rate of first use from 1980 to 1994, the rate of first use for that group is now similar to that for the 12-17 age group (about 10 per 1000 person years). For crack cocaine, the estimated annual number of new users has remained stable in recent years.

Heroin, Hallucinogens and Inhalants:

- There were an estimated 122,000 new heroin users in 1994. Estimates of heroin incidence are subject to wide variability and do not show any clear trend, although the 1994 estimate of new users is larger than estimates for prior recent years, a finding that is consistent with anecdotal reports of increasing numbers of new heroin users.

- There were an estimated 912,000 new hallucinogen users in 1994. The rate among youths age 12-17 increased between 1991 and 1994, from 11.2 to 23.3 per 1,000 person years.

- There were an estimated 666,000 new inhalant users in 1994, up from 428,000 in 1991. The rate of first use among youths age 12-17 rose significantly from 1991 to 1994, from 11.2 to 22.2 per 1000 person years in 1994.

Cigarettes

- An estimated 3 million people tried their first cigarette in 1993 (1994 estimate not available). An estimated 1.5 million people began smoking on a daily basis in 1994. The annual number of new daily smokers has remained stable since 1982.

Alcohol

- In 1993 there were approximately 4.2 million new users of alcohol, while in 1991 there were only 3.3 million users. The rate of new usage among the 18-25 age group, where it is highest, was flat in recent years (239 per 1000 person years in 1993), but the rate among the 12-17 age group increased from 125 per 1000 person years in 1991 to 172 in 1993.

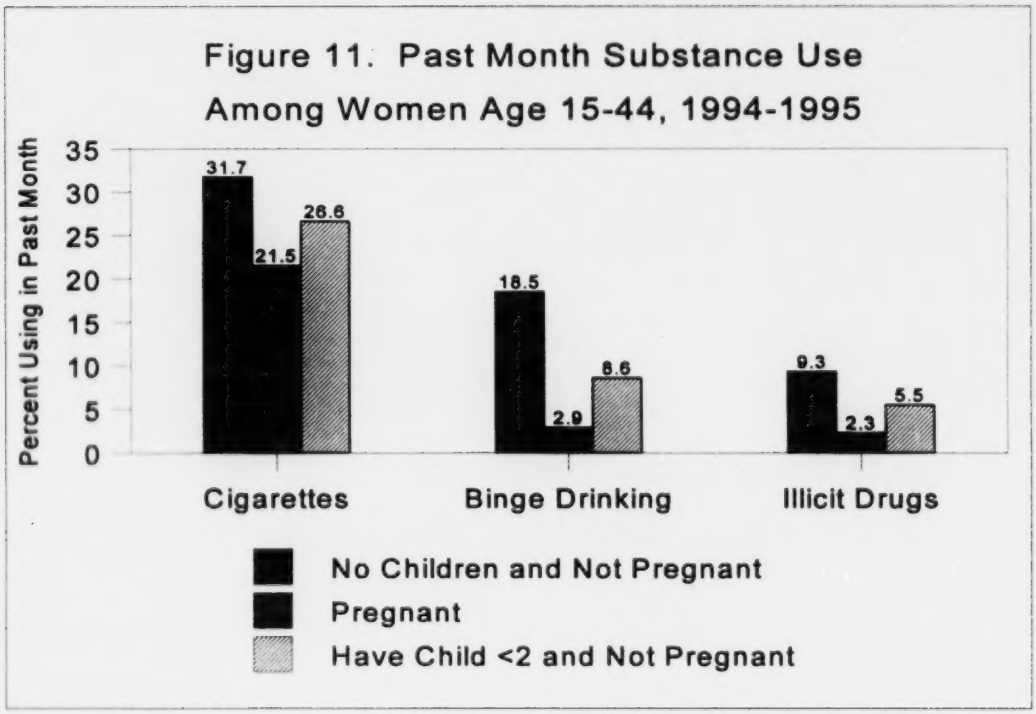
10. WOMEN OF CHILDBEARING AGE

It is important to focus on women of childbearing age (age 15-44 in this report) because their substance abuse could affect the children they care for or give birth to. Because the NHSDA includes questions about pregnancy, it is possible to study substance use among pregnant women. To allow more detailed analyses to be done, data from the 1994 and 1995 NHSDAs were combined, providing a sample of 761 pregnant and 14,233 nonpregnant women age 15-44.

Reporting of pregnancy by NHSDA respondents appears reasonably accurate, producing an estimate of about 2.7 million pregnant women per year. This is close to the number of pregnant women on a given day that would be expected based on counts of live births from the birth registration system, and estimates of induced abortions and fetal loss rates (Ventura, Taffel, Mosher, et al 1995).

- Overall, 7.3 percent (4.3 million) of women age 15-44 in 1995 had used an illicit drug in the past month. The corresponding rate for men age 15-44 was 11.6 percent.

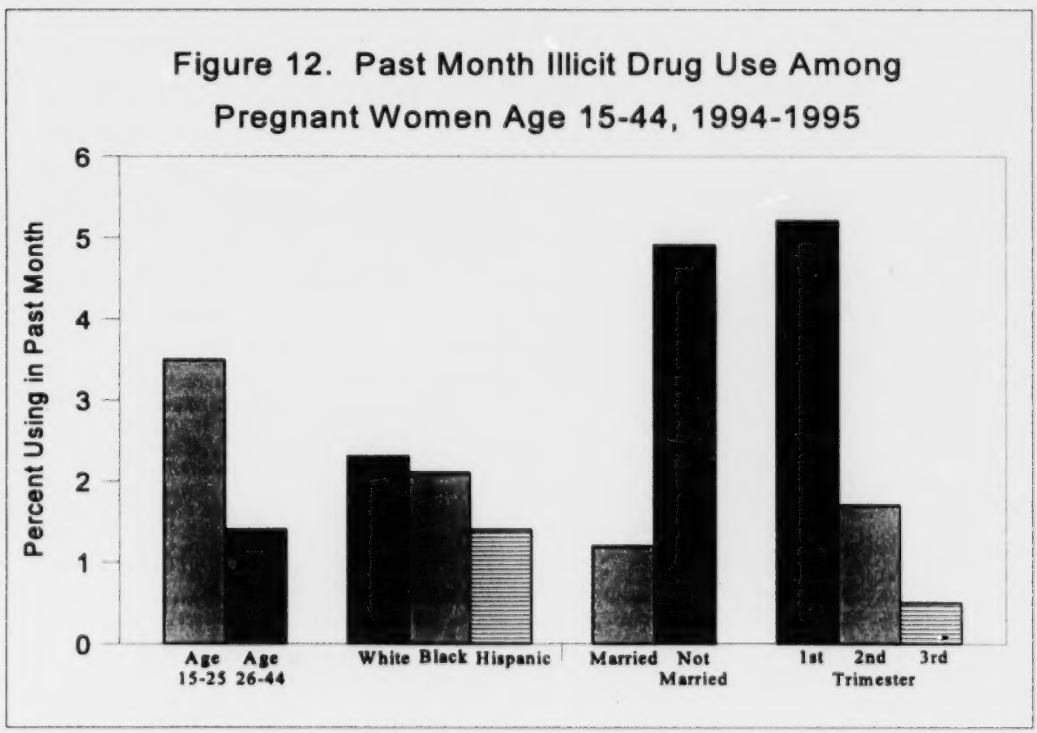
- Of the 4.3 million women age 15-44 who were current illicit drug users, more than 1.6 million had children living with them. About 400,000 had at least one child under 2 years of age.



- Among women age 15-44 with no children who were not pregnant, 9.3 percent were current illicit drug users. Only 2.3 percent of pregnant women were current drug users, which suggests that most women may reduce their drug use when they become pregnant. However, women who recently gave birth (have a child under 2 years old, and not pregnant) have a rate of use of 5.5 percent, suggesting that many women resume their drug use after giving birth. Similar patterns are seen for alcohol and cigarette use (Figure 11).

- Among pregnant women, rates of illicit drug use and cigarette use were highest among women in the first trimester and lowest among women in the third trimester (Figure 12).

- Among pregnant women, rates of substance use generally varied as they do among nonpregnant women (Figure 12). Rates were higher among women 15-25 than among those 26-44, and they were higher among unmarried women than among married women. One exception to this pattern was evident in smoking rates by age. Nonpregnant women age 15-25 and age 26-44 had about the same rates of smoking. However, among pregnant women, those age 26-44 had a significantly lower past month smoking rate than those age 15-25, suggesting that older women smokers are more likely to reduce their smoking during pregnancy than are younger women smokers.



11. DISCUSSION OF RESULTS

The 1995 National Household Survey on Drug Abuse provides a comprehensive description of substance use and abuse in the United States. Despite its limitations, the NHSDA provides reliable information to assess trends, patterns, and relationships associated with substance abuse. The interpretation of the NHSDA data is best made when studied in conjunction with other available data sources, taking into account the strengths and limitations of each source.

The 1995 NHSDA data clearly show a continuing increase in illicit drug use prevalence among youths. The increase in marijuana use seen in the 1994 NHSDA has continued in 1995. In addition, increases in hallucinogen and cocaine use among youth were found in the 1995 NHSDA. The NHSDA results are consistent with the results of the Monitoring the Future (MTF) Study, which has shown statistically significant increases in drug use among eighth, tenth, and twelfth graders from 1992 through 1995 (USDHHS, 1995). Despite methodological differences (e.g., populations covered and data collection methods) between MTF and NHSDA that affect the levels of drug use prevalence reported, both surveys show recent increases in the use of marijuana, cocaine, and hallucinogens among adolescents. The MTF and the 1994 NHSDA both show that perceived risk of harm in using drugs, a key correlate of drug use, has decreased among youths in recent years, and that drugs are easily accessible to young people.

Newly developed estimates of trends in drug use incidence (i.e., initiation) provide a different measure of the drug use situation. They can provide an early indication of emerging patterns of use. The estimated annual number of new marijuana users increased from 1.4 million in 1991 to 2.3 million in 1994, indicating no signs of any reversal of the upward trends in prevalence.

The recent upturn in illicit drug use among youths has important implications for substance abuse prevention and treatment efforts. In terms of prevention, there is an obvious need to focus immediate attention on children and adolescents. In the long run, the increasing proportion of young people using illicit drugs will probably result in continuing pressure on the substance abuse treatment system in future years, as many new drug users progress to addiction and require intervention.

Reports of increasing heroin and methamphetamine use have been prominent over the past few years, based on data from medical examiners, emergency departments, and drug treatment facilities (NIDA 1996a; Greenblatt, Gfroerer and Melnick 1995). The limitations of the NHSDA for measuring these kinds of drug use behaviors have made it difficult to either refute or support these reports. However, the 1995 NHSDA data show an increasing rate of heroin smoking (in lifetime) between 1994 and 1995, particularly among adults age 35 and older. Methamphetamine use (lifetime) rates also suggest some increase, although the change between 1994 and 1995 was not statistically significant.

The NHSDA continues to show the aging of the drug using population. Cohorts who were teenagers and young adults in the 1960s and 1970s are now older, and although most no longer use illicit drugs, many still do. This aging cohort, composed primarily of the baby boom, is adding increasingly to the "35 and older" age group shown in NHSDA reports. Thus, the proportion of drug users that are age 35 and older continues to increase (from 10 percent of users in 1979 to 27 percent of users in 1995). Data from the Drug Abuse Warning Network (DAWN) on drug-related hospital emergency department episodes also show the impact of the aging cohort of drug users. In 1979, 12 percent of patients with cocaine episodes were age 35 and older. By 1985 the proportion was 19, and by 1995 it was 43.

Many of the drug users in this aging cohort have used drugs for many years and have developed severe drug problems. This may partly explain the continuing rise in hospital emergency department episodes, which are more likely to involve these heavy users than occasional users or those who use only marijuana. Cocaine-related emergency room visits have increased from 5,000 in 1981 to 29,000 in 1985 (the peak year for past month cocaine prevalence in the NHSDA) to 142,000 in 1995. Heroin-related emergency room visits have increased from 12,000 in 1979 to 76,000 in 1995 (SAMHSA 1996d,e).

It is important to recognize the limitations of both DAWN and the NHSDA for measuring the prevalence of heavy drug use. As is discussed in DAWN reports, there are many factors that could influence trends in drug-related episodes. These factors include changes in the purity and availability of drugs, changes in patterns of use (e.g., drug combinations or route of administration), availability of treatment programs ("seeking detoxification" was the reported reason for visit in 25 percent of cocaine-related episodes in 1995), and changes in patient management practices. Furthermore, research has indicated that only a small, nonrepresentative proportion of heavy cocaine users account for cocaine-related emergency room episodes (Gfroerer and Brodsky 1993).

Sample size, coverage, and validity problems are likely to be more pronounced for NHSDA estimates of heavy users than for other measures generated by the survey. Therefore, estimates of heavy use are considered conservative, and changes over time are generally not statistically significant. For example, the NHSDA has produced estimates of about 600,000 frequent cocaine users with no significant changes in the size of this population since 1985. By using various other data sources and making a number of assumptions (many of which are of uncertain validity), researchers have estimated that there are over 2 million frequent cocaine users in the U.S. (Rhodes 1993).

Clearly there is considerable uncertainty about the size of the heavy drug-using population. Estimates from the NHSDA can provide useful data to help describe this population, but should only be used in conjunction with other data sources. Appendix 2 contains a discussion of a methodology developed by OAS that uses arrest and treatment data to adjust NHSDA estimates of heavy drug use.

APPENDIX 1: DESCRIPTION OF THE SURVEY

I. Sample Design

The sample design of the survey has changed over time, but it has always been representative of the U.S. general population age 12 and older and has always oversampled youths and young adults. The 1995 NHSDA employed a multistage area probability sample of 17,747 persons. The first stage of selection is a sample of 115 Primary Sampling Units (PSUs), each consisting of counties (administrative subdivisions of States) or groups of counties such as metropolitan areas. Within these PSUs, segments (such as city blocks or enumeration districts) are selected. In 1995, 1,940 segments were selected, and in each of these segments a listing of all addresses was made, from which a sample of 66,431 addresses was selected. Of these, 56,469 were determined to be eligible sample units. In these sample units (which can be either households or units within group quarters), sample persons were randomly selected (with unequal probabilities) using a screening procedure carried out by interviewers.

The 1995 NHSDA sampled segments were allocated equally into four separate samples, one for each three month period during the year, so that the survey is essentially continuously in the field. By assigning the appropriate selection probabilities at the PSU, segment, and person levels, oversampling of certain subpopulations of interest is accomplished. In 1995, these subpopulations were young people (age 12-34), African-Americans and Hispanics. Persons age 18-34 identified as current cigarette smokers by the household screening respondents were also oversampled.

II. Data Collection Methodology

The data collection method used in the NHSDA is to conduct in-person interviews with sample persons, incorporating procedures that would be likely to maximize respondents' cooperation and willingness to report honestly about their illicit drug use behavior. Introductory letters are sent to sampled addresses, followed by an interviewer visit. A five-minute screening procedure involves listing all household members along with their basic demographic data and possible selection of sample person(s). This selection process is designed to provide the necessary sample sizes for specified population groups by selecting either 0, 1, or 2 persons per household, depending on the composition of the household.

Interviewers attempt to conduct interviews in a private place, away from other household members. The interview averages about an hour, and includes a combination of interviewer-administered and self-administered questions. With this procedure, the answers to sensitive questions (such as those on illicit drug use) are recorded by the respondent and not seen or reviewed by the interviewer. After these answer sheets are completed, they are placed by the respondent in an

envelope, which is sealed and mailed to the contractor, Research Triangle Institute, with no personal identifying information attached.

III. Data Processing

Upon receipt, questionnaires are checked for critical identification and demographic data, then keyed to disk. This creates a file consisting of one record for each completed interview. Extensive within-record consistency checks and resolution of most inconsistencies and missing data are done using machine editing routines, called logical imputation. For some key variables that still have missing values after the application of logical imputation, statistical imputation is used to replace the missing data with appropriate valid response codes. Two types of statistical imputation procedures are used. Hot-deck imputation involves the replacement of a missing value with a valid code taken from another respondent who is "similar" and has complete data. Logistic regression models are also used to determine replacement values for some variables.

Each record (i.e., respondent) is assigned an analysis weight which incorporates:

a. The inverse of the selection probability for the respondent. This is the product of the inverses of selection probabilities at each stage of sampling.

b. Adjustments for household and person-level nonresponse.

c. Poststratification adjustment to Census projections (of the civilian noninstitutionalized population of the total U.S.) for the midpoint of each NHSDA data collection period. Adjustments are made to age, sex, and race/ethnicity distributions (see Appendix 2 for a discussion of the poststratification adjustment).

Data are generally released to the public about six months after the end of data collection. Public use data files are available 1-2 years after completion of data collection.

IV. Preliminary Versus Final Estimates

Estimates presented in this report are considered preliminary because they are based on the initial weighting, editing, and imputation procedures implemented immediately after data collection was completed (December 1995). Further analyses of the 1995 NHSDA data and evaluation of the estimation procedures is ongoing, and may result in revisions in later data releases. However, if no such revisions are deemed necessary, final estimates will be the same as the preliminary estimates presented in this report. Final estimates will be published in Population Estimates, which will be available in mid-1996 and in Main Findings, which will be published in 1997. SAMHSA will also release additional analyses from the 1995 NHSDA through additional published reports and journal articles.

APPENDIX 2: LIMITATIONS OF THE DATA

I. Target Population

An important limitation of the NHSDA estimates of drug use prevalence is that they are only designed to describe the target population of the survey, the civilian noninstitutionalized population. Although this includes more than 98% of the total U.S. population, it does exclude some important and unique subpopulations who may have very different drug-using patterns. The survey excludes active military personnel, who have been shown to have significantly lower rates of illicit drug use. Persons living in institutional group quarters, such as prisons and residential drug treatment centers, are not covered in the NHSDA and have been shown in other surveys to have higher rates of illicit drug use. Also excluded are homeless persons not living in a shelter on the survey date, another population shown to have higher than average rates of illicit drug use. Appendix 3 describes other surveys that provide data for these populations.

II. Sampling Error and Statistical Significance

The sampling error of an estimate is the error caused by the selection of a sample instead of conducting a census of the population. Sampling error is reduced by selecting a large sample and by using efficient sample design and estimation strategies such as stratification, optimal allocation, and ratio estimation.

With the use of probability sampling methods in the NHSDA, it is possible to develop estimates of sampling error from the survey data. These estimates have been calculated for all prevalence estimates presented in this report using a Taylor series linearization approach that takes into account the effects of the complex NHSDA design features. The sampling errors are used to identify unreliable estimates and to test for the statistical significance of differences between estimates.

Estimates considered to be unreliable due to unacceptably large sampling error are not shown in this report, and are noted by asterisks (*) in the tables in the appendix. The criterion used for suppressing estimates was based on the relative standard error (RSE), which is defined as the ratio of the standard error over the estimate. The log transformation of the proportion estimate (p) was used to calculate the RSE. Specifically, rates and corresponding estimated number of users were suppressed if:

$$\text{RSE}[-\ln(p)] > 0.175 \quad \text{when } p < .5$$
$$\text{or } \text{RSE}[-\ln(1-p)] > 0.175 \quad \text{when } p \geq .5.$$

Estimates were also suppressed if they rounded to zero or 100 percent. This occurs if $p < .0005$ or if $p \geq .9995$. Statistical tests of significance have been computed for comparisons of estimates from 1995 with 1994. Results are shown

in the appendix 5 tables. As indicated in the footnotes, significant differences are noted by "a" (significant at the .05 level of significance) and "b" (significant at the .01 level of significance). All changes described in this report as increases or decreases were tested and found to be significant at least at the .05 level, unless otherwise indicated.

Nonsampling errors such as nonresponse and reporting errors may affect the outcome of significance tests. Also, keep in mind that while a level of significance equal to .05 is used to determine statistical significance in these tables, large differences associated with slightly higher p-values (specifically those between .05 and .10) may be worth noting along with the p-values. Furthermore, statistically significant differences are not always meaningful, because the magnitude of difference may be small or because the significance may have occurred simply by chance. In a series of twenty independent tests, it is to be expected that one test will indicate significance merely by chance even if there is no real difference in the populations compared. In making more than one comparison among three or more percentages (comparing percentages within a table), there has been no attempt to adjust the level of significance to account for making simultaneous inferences (often referred to as multiple comparisons). Therefore, the probability of falsely rejecting the null hypothesis at least once in a family of k comparisons is higher than the significance level given for individual comparisons (in this report, either .01 or .05).

When making comparisons of estimates for different population subgroups from the same data year, the covariance term, which is usually small and positive, has typically been ignored. This results in somewhat conservative tests of hypotheses that will sometimes fail to establish statistical significance when in fact it exists.

III. Nonsampling Error

Nonsampling errors occur from nonresponse, coding errors, computer processing errors, errors in the sampling frame, reporting errors, and other errors. Nonsampling errors are reduced through data editing, statistical adjustments for nonresponse, and close monitoring and periodic retraining of interviewers.

Although nonsampling errors can often be much larger than sampling errors, measurement of most nonsampling errors is difficult or impossible. However, some indication of the effects of some types of nonsampling errors can be obtained through proxy measures such as response rates and from other research studies.

Of the 56,469 eligible households sampled, 53,201 were successfully screened for a screening response rate of 94.2%. In these screened households, a total of 22,016 sample persons were selected, and completed interviews were obtained from 17,747 of these sample persons, for an interview response rate of 80.6%. 2,004 (9.1%) of sample persons were classified as refusals, 1,394 (6.3%) were not available or never at home, and 871 (4.0%) did not participate for various other reasons, such as physical or mental incompetence or language barrier. Response

rates were highest in younger age groups. Response rates were also higher among Hispanics (83%) than among blacks (80%) and whites (80%).

Among survey participants, item response rates were above 98% for most questionnaire items. However, inconsistent responses for some items, including the drug use items, are common. Estimates of drug use from the NHSDA are based on the responses to multiple questions by respondents, so that the maximum amount of information is used in determining whether a respondent is classified as a drug user. Inconsistencies in responses are resolved through a logical editing process that involves some judgement on the part of survey analysts and is a potential source of nonsampling error. A typical occurrence is when a respondent reports their most recent use of a drug as more than a month ago, but in a later question they report having used in the past month. (This could occur because the interviewer may have developed greater rapport with the respondent in the latter stages of the interview, leading to more openness on the part of the respondent.) This respondent would be considered a past month user. For 1995, 21% of the estimate of past month marijuana use and 37% of the past month cocaine use estimate is based on such cases.

NHSDA estimates are based on self-reports of drug use, and their value depends on respondents' truthfulness and memory. Although many studies have generally established the validity of self-report data and the NHSDA procedures were designed to encourage honesty and recall, some degree of underreporting is assumed. No adjustment to NHSDA data is made to correct for this (Appendix 4 lists a number of references addressing the validity of self-reported drug use data). The methodology used in the NHSDA has been shown to produce more valid results than other self-report methods (e.g., by telephone) (Turner, Lessler, and Gfroerer 1992; Aquilino 1993). However, comparisons of NHSDA data with data from surveys conducted in classrooms suggest that underreporting of drug use by youths in their homes may be substantial (Gfroerer 1993).

The incidence estimates discussed in section 9 of this report are based on retrospective reports of age at first drug use by survey respondents interviewed during 1994-95, and may be particularly subject to several biases.

Bias due to differential mortality occurs because some persons who were alive and exposed to the risk of first drug use in the historical periods shown in the tables died before the 1994 and 1995 NHSDAs were conducted. This bias is probably very small for estimates shown in this report. Incidence estimates are also affected by memory errors, including recall decay (tendency to forget events occurring long ago) and forward telescoping (tendency to report that an event occurred more recently than it actually did). These memory errors would both tend to result in estimates for earlier years (i.e., 1960s and 1970s) that are downwardly biased (because of recall decay) and estimates for later years that are upwardly biased (because of telescoping). There is also likely to be some underreporting bias due to social acceptability of drug use behaviors and respondents' fear of disclosure. This is likely to have the greatest impact on recent estimates, which reflect more recent use and reporting by younger respondents. Finally, for drug use

that is frequently initiated at age 10 or younger, estimates based on retrospective reports one year later underestimate total incidence because 11 year old children are not sampled by the NHSDA. Prior analyses showed that alcohol and cigarette (any use) incidence estimates could be significantly affected by this. Therefore, for these drugs no 1994 estimates were made, and 1993 estimates were based only on the 1995 NHSDA.

Overall, these biases are likely to have the greatest effect on the most recent estimates, i.e., 1992-94, primarily because they reflect recent drug use and because they are heavily based on the reports of adolescents. Thus, the estimates for recent years may be less reliable than estimates for earlier periods.

IV. Estimation of Heavy Drug Use

While the NHSDA collects data on the most severely affected drug users, the survey design is less suited to estimate these problems. The limitations that preclude more accurate estimates are primarily the sample size, coverage, and the use of a self-report. Because heavy drug use is relatively rare in the general population, the NHSDA captures a small number of these users, resulting in a relatively large sampling error. In addition to this instability resulting from the small sample, underestimation is believed to occur because many heavy drug users may not maintain stable addresses and, if located, may not be available for an interview. Finally, as with all NHSDA respondents, heavy drug users who participate in the survey may not always report their drug use accurately during the interview.

A new estimation procedure was designed at OAS to produce improved estimates of heavy drug use (Wright, Gfroerer and Epstein 1995). This procedure uses external counts of the number of people in treatment for drug problems (from the National Drug and Alcoholism Treatment Unit Survey) and the number of arrests for non-traffic offenses (from the F.B.I.'s Uniform Crime Reports) to adjust NHSDA data. This ratio estimation procedure provides a partial adjustment that accounts for undercoverage of hard-to-reach populations and also adjusts for underreporting of drug use by survey respondents. However, it does not reduce sampling error.

Past applications of this adjustment have resulted in 40-80 percent higher estimates of past year heroin use and 20-40 percent higher estimates of frequent cocaine use. Adjustments have not yet been developed for the 1995 NHSDA, but these previous results point out the likelihood of substantial underestimation of some of these measures (unadjusted) shown in this report.

V. Adjustment of 1979-1993 NHSDA Estimates to Account for the New Survey Methodology Used in the 1994 and 1995 NHSDAS

The NHSDA is an important source of data for policy makers, not only because it provides measures of substance abuse for a single year, but also because the series of surveys over the last several years provides a measure of change in substance abuse in the population over time. Beginning in 1994, the NHSDA began using an improved questionnaire and estimation procedure based on a series of studies and consultations with drug survey experts and data users. Because this new methodology produces estimates that are not directly comparable to previous estimates, the 1979-1993 NHSDA estimates presented in this report were adjusted to account for the new methodology that was begun in 1994.

Nearly all of the 1979-1993 substance use prevalence estimates presented in this report were adjusted using a simple ratio correction factor that was estimated at the total population level using data from the pooled 1993 and 1994 NHSDAs. The remaining substance use prevalence estimates were adjusted by formally modeling the effect of the new methodology, relative to the old methodology, using data from the 1994 NHSDA. The modeling procedure was used for the more prevalent substance use measures that changed significantly between the old- and new-version NHSDA questionnaires. The modeling procedure was particularly desirable for the more prevalent measures because the procedure was able to use a greater number of potentially significant explanatory variables in the adjustment compared to the simple ratio correction factor. Each of the procedures are discussed below.

Ratio Adjustment

Most of the 1979-1993 NHSDA estimates were adjusted using a ratio correction factor that measured the effect of the new methodology, relative to the old methodology, using data from the 1993 and 1994 NHSDAs. As explained in the Introduction in this report, the 1994 NHSDA was designed to generate two sets of estimates. The first set of estimates, which in previous reports was referred to as the 1994-A set of estimates, was based on the same questionnaire and editing method that was used in 1993 (and earlier). The second set of estimates, referred to as the 1994-B set, was based on the new NHSDA survey methodology. Since the 1994-A estimates were generated from a sample that was roughly one-fourth the size of the 1994-B, to increase the precision of the ratio correction factor, the 1994-A sample was pooled with the 1993 sample.

The 1979-1993 NHSDA estimates that were adjusted using the ratio correction factor included estimates of lifetime, past year and past month use of cocaine, crack, inhalants, hallucinogens (including PCP and LSD), heroin, any psychotherapeutic, stimulants, sedatives, tranquilizers, analgesics, any illicit drug other than marijuana and smokeless tobacco as well as estimates of past year frequency of use of marijuana, cocaine and alcohol. This adjustment was computed at the total sample level and was equally applied to all corresponding estimates computed among subgroups of the total population. Consequently, for

example, the same ratio adjustment was used to correct all estimates of past year cocaine use, regardless of the demographic subgroup under consideration. Mathematically, this ratio adjustment can be expressed as follows:

Suppose i denotes the sampled respondent, y_i denotes a 0/1 variable to indicate nonuse or use of some particular substance, and w_i denotes the sample weight. Then the ratio adjustment was computed as:

$$R = \frac{\sum_{i \in S_{1994\text{-}B}} w_i\, y_i}{\sum_{i \in S_{1993 \cup 1994\text{-}A}} w_i\, y_i} = \frac{\bar{y}_{1994\text{-}B}}{\bar{y}_{1993 \cup 1994\text{-}A}}$$

The latter equality is true because the sample weights in the pooled 1993 and 1994-A sample were adjusted slightly so that they would sum to the same demographic control totals as the 1994-B sample across the variables typically used in the NHSDA post stratification procedure.

Model-Based Adjustment

A model based method of computing adjustments that would account for the changes in the NHSDA methodology was used for estimates of the use of the more prevalent drugs including lifetime, past year and past month use of alcohol, marijuana, cigarettes, any illicit drug as well as past month binge drinking and past month heavy drinking. The model that was used is based on a constrained exponential model originally proposed by Deville & Särndal (1992). Similar to the ratio adjustment, this method of adjusting previous estimates models the combined effect of all measurement error differences between the new and old methodologies. This model offers the primary advantages of allowing (1) a greater number of potentially significant explanatory variables in the adjustment and (2) bounding the resulting adjustment between predetermined thresholds. This apriori bounding eliminates extreme adjustments that might otherwise occur, particularly for small subpopulations. Additionally, the model fitting procedure used to compute the adjustment forces the adjusted 1994-A estimates to equal the 1994-B estimates within the subpopulations represented by the dummy variables in the vector of model predictors. Mathematically, this model can be expressed as follows:

$$R_i = \frac{L(U-1) + U(1-L)e^{-AX_i\beta}}{(U-1) + (1-L)e^{-AX_i\beta}} \qquad (1)$$

Where the ratio adjustment R_i can be interpreted as:

$$R_i = \frac{\text{Probability Of Reporting Use With The New Survey Methodology}}{\text{Probability Of Reporting Use With The Old Survey Methodology}}$$

In equation (1) the constant A is simply a scale factor set equal to $[U-L] + [(1-L)(U-1)]$, β are the model coefficients, and X_i is a vector of

explanatory variables. The explanatory variables considered in the models consisted of the categorical indicator variables for age group and race/ethnicity. The parameters L and U are the predetermined constants that force the estimated R_i to be

$$L \leq R_i \leq U \qquad \text{for all i and for any value of } X_i\beta.$$

Notice that if the constant L is set equal to zero and U approaches ∞, then the constant A approaches 1, and equation (1) reduces to the familiar, unconstrained exponential model:

$$R_i = e^{-X_i\beta}.$$

The model parameter vector β in (1) was estimated by solving the generalized raking equations:

$$\sum_{i \in S_{1994\text{-}A}} w_i R_i X_i^T y_i = \sum_{i \in S_{1994\text{-}B}} w_i X_i^T y_i \qquad \text{subject to the constraints.}$$

Notice from the above raking equations that the estimated adjustment R_i forces the 1994-A estimate to equal the 1994-B estimate for any subpopulation represented by an indicator variable in X_i. Therefore, for example, if an appropriate indicator for the age group = 12-17 year-olds was included in X_i, then the model-based estimate of the R_i's would produce an adjusted prevalence estimate using the 1994-A sample that exactly equaled the prevalence estimate generated from the 1994-B sample for the 12-17 year-old age group.

APPENDIX 3: OTHER SOURCES OF DATA

A variety of other substance abuse surveys are useful in providing the context for the NHSDA, and are discussed below.

I. Other National Surveys of Illicit Drug Use

Monitoring the Future (MTF) is an annual school survey of 8th, 10th, and 12th graders with college and young adult followups, conducted by the University of Michigan, Institute for Social Research, under a grant from NIDA. The survey is conducted every spring. The 1995 results were released in a press release in December 1995 (U.S. DHHS 1995). For all three grades combined, there were about 420 public and private schools and about 50,000 students in the sample, for an average of approximately 140 schools and 17,000 students per grade (Johnston, O'Malley, and Bachman 1995).

Comparisons between the MTF and the students sampled in the NHSDA have generally shown NHSDA prevalences to be lower than MTF estimates, with the relative differences being largest for 8th graders. The direction of the estimates of change from year to year among 12th graders have generally been similar. Both surveys have shown significant increases in illicit drug use among adolescents between 1992 and 1995. The lower prevalences in the NHSDA may be due to more underreporting in the household setting than in the MTF school setting. MTF does not survey dropouts, a group shown (using the NHSDA) to have higher rates of use (Gfroerer 1993). For a single grade, the NHSDA sample sizes are much smaller than the MTF sample sizes.

The National Comorbidity Survey (National Survey of Health and Stress) was a 1991 household survey of persons aged 15-54 which collected data on drug abuse and mental health. The study was designed to provide nationally representative estimates of psychiatric disorders (including substance abuse), as defined by DSM-III-R criteria. It included about 8,000 households and was conducted by the Institute for Social Research under a grant from the National Institute for Mental Health with additional support from NIDA. Several papers have been published (Kessler et al 1994). Estimates of illicit drug use prevalence and the prevalence of drug dependence from the NCS were similar to estimates from the 1991 NHSDA. (Anthony et al 1993; Epstein and Gfroerer 1995).

Another recent study of illicit drug use is the Drug Supplement on the 1991 National Health Interview Survey (NHIS). This supplement was funded by the National Institute on Drug Abuse, and has the potential of providing important data on the relationship between drug use and health status. It also included questions designed to provide estimates of DSM-III-R abuse and dependence on marijuana and cocaine. The supplement covered adults aged 18-44. Comparisons with NHSDA estimates show significantly lower reported rates of use of marijuana and cocaine in the NHIS (Keer et al 1994).

In 1992, the NHIS was also used as sampling base for conducting the Youth Risk Behavior Survey (YRBS), a nationally representative sample of youth aged 12-21 years. The YRBS collects data on the prevalence of a variety of unhealthy behaviors, including alcohol, cigarette, marijuana, and cocaine use. This survey used a unique data collection method that allowed respondents to listen to tape recorded questions and record answers on an answer sheet that did not allow observers to match the answers with questions. This procedure was intended to maximize the privacy of youths' responses and therefore improve the reporting of sensitive behaviors. In general, the survey found higher rates of alcohol, cigarette, marijuana, and cocaine use for youths than were found in the 1992 NHSDA (Adams et al 1995).

The National Pregnancy and Health Survey (NPHS) was conducted in 1992-1993 (NIDA 1996b). Sponsored by NIDA, it was the first probability survey specifically designed to provide extensive information on the nature and extent of substance abuse among women delivering live-born infants in the U.S. A random sample of 2,613 mothers delivering live borns at hospitals, selected to represent approximately 4 million women delivering live borns, was interviewed between 6 and 36 hours after delivery (while they were still in the hospital) about their use of substances during pregnancy. The survey estimated that 5.5 percent of all women delivering live borns had used illicit drugs at some time during their pregnancy. Alcohol was used by 18.8 percent and cigarettes were used by 20.4 percent. Consistent with the NHSDA, the NPHS found that while 4.6 percent of these women had used marijuana during the past 12 months (defined as use during pregnancy or use in the three months before their pregnancy), only about 1.5 percent used marijuana during the second and third trimesters of the pregnancy. The NHSDA found that while 8.3 percent of pregnant women reported use of marijuana in the past year, only 1.5 percent reported use in the past month.

II. Alcohol and Cigarette Use Surveys

Two recent surveys with information on the use of cigarettes and alcohol are the 1994 National Health Interview Survey Year 2000 Objectives Supplement (NHIS-2000) and the National Longitudinal Alcohol Epidemiologic Survey (NLAES).

The results of the NHIS-2000 were published in July 1996 (CDC 1996a). This survey of approximately 20,000 adults was conducted by the Bureau of the Census for the National Center for Health Statistics. The survey estimated that, in 1994, 25.5 percent of the population age 18 and over were current smokers, and that this rate was unchanged from 1993. Current smokers are defined as those who have smoked at least 100 cigarettes in their lifetime and answer that they currently smoke, including those who smoke only on some days. This definition is somewhat different from the NHSDA definition of current smoking (any use in the past month) which resulted in a prevalence of 29.8 percent for adults in 1994. The 1995 NHSDA estimate for adults was also 29.8 percent.

School-based surveys have shown increases in smoking rates among students from 1991 to 1995. Past-month smoking rates found in the Monitoring the Future

Study (MTF) were 14.3 percent in 1991 and 19.1 percent in 1995 for 8th graders. For tenth graders, rates were 20.8 percent in 1991 and 27.9 percent in 1995. For 12th graders, rates were 28.3 percent in 1991 and 33.5 percent in 1995. Small but statistically significant increases were found among 10th and 12th graders between 1994 and 1995 (USDHHS 1995). The Youth Risk Behavior Survey also found increases in current cigarette use among students in grades 9-12 from 27.5 percent in 1991 to 34.8 percent in 1995 (CDC 1996b). While the NHSDA trend for youth (age 12-17) smoking has not shown these increases, the NHSDA estimates for years prior to 1994 were apparently substantial underestimates because the data were collected without private self-administered answer sheets. When the NHSDA converted to the use of these answer sheets in 1994, the smoking rate for adolescents approximately doubled. This raises questions about the accuracy of the NHSDA measurement of the trend prior to 1994, even after adjustments are made to account for the effect of the new questionnaire.

The Surgeon General's Report on Smoking and Health (US DHHS 1994b) included smoking prevalence data from a number of sources, including the NHSDA. Comparisons between the various sources were made and methodological differences were assessed. These comparisons were based on NHSDA data prior to 1994, which were based on the interviewer-administered smoking questions, and thus show low rates of smoking in the NHSDA, particularly among youth.

Alcohol supplements sponsored by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and included on the NHIS have also provided estimates of alcohol use, including DSM-III-R abuse and dependence (Grant et al 1991).

NLAES was conducted by the Bureau of the Census for the NIAAA in 1992. Face-to-face interviews were conducted with 42,862 respondents age 18 and older in the contiguous U.S. It was designed to study the drinking practices, behaviors, and related problems in the general public. The survey included an extensive set of questions designed to assess the presence of symptoms of alcohol abuse and dependence during the prior 12 months, based on the criteria from the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) (American Psychiatric Association 1994). NLAES estimated that 4.4 percent of adults were alcohol dependent and another 3.0 percent were classified as abusing alcohol, but not dependent, within the past year (Grant et al 1995).

III. Surveys of Populations Not Covered by the NHSDA

The Washington, D.C. Metropolitan Area Drug Study (DC*MADS) was designed to (1) estimate the prevalence, correlates, and consequences of drug abuse among all types of people residing in one metropolitan area of the country during one period of time and (2) to develop a methodological model for similar types of research in other metropolitan areas of the country. Sponsored by the National Institute on Drug Abuse and conducted in 1991 and 1992, the project focused on hard-to-reach populations, such as adult and juvenile offenders, new mothers, and school dropouts. DC*MADS provided a replicable methodological approach for developing representative estimates of the prevalence of drug abuse among all

population subgroups, regardless of their residential setting, in a metropolitan area. The key domains in DC*MADS were the homeless, the institutionalized, and the household. A major finding of DC*MADS was that, when data are aggregated for populations from each of the three domains, the overall prevalence estimates for use of drugs differ only marginally from those that would be obtained from the household population alone (i.e., from the NHSDA). However, for some categories of drug users, the nonhousehold population was found to include a substantial proportion of users. About 20 percent of past month crack users, 20 percent of past year heroin users, and one-third of past year needle users were found in the nonhousehold population (NIDA 1992; NIDA 1993; NIDA 1994a; NIDA 1994b).

The 1992 Worldwide Survey of Substance Abuse and Health Behaviors Among Military Personnel was sponsored by the Department of Defense and conducted by Research Triangle Institute. The survey interviewed 25,000 Armed Forces personnel worldwide. Military personnel exhibited lower rates of illicit drug use than the civilian population after controlling for sociodemographic composition of the two populations, but higher rates of cigarette smoking and heavy alcohol drinking (Research Triangle Institute 1992).

The Survey of Inmates of Local Jails (1989) is a sample survey of approximately 6000 inmates in 400 jails, conducted by the Bureau of the Census for the Bureau of Justice Statistics (BJS). BJS also sponsors a Survey of Inmates in State Correctional Facilities. Among other items, these surveys collect information on the use of drugs in the month before the offense for convicted inmates. The survey results indicate substantially higher rates of use among convicted inmates (BJS 1991; BJS 1993) than in the household population.

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APPENDIX 5: DETAILED TABLES

Table 1A. Estimated Numbers of Persons (in Thousands) in the U.S. Population Aged 12 and Older, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	180,343	186,440	192,605	198,347	201,188	202,859	205,713	207,199	209,411	211,532
AGE GROUP										
12-17	23,758	22,295	21,558	20,250	19,978	20,145	20,684	21,224	21,773	22,208
18-25	32,604	33,236	31,601	29,688	29,021	28,496	27,964	28,327	28,027	27,820
26-34	31,339	34,241	36,477	38,570	38,821	38,737	38,215	37,194	36,588	35,975
≥35	92,641	96,669	102,969	109,839	113,368	115,481	118,850	120,453	123,023	125,529
RACE/ETHNICITY										
White	147,202	150,087	154,224	156,742	157,427	157,363	158,398	157,693	159,029	159,722
Black	19,271	20,134	21,332	22,271	22,779	23,030	23,649	23,002	23,365	23,686
Hispanic	10,586	11,834	13,256	14,925	15,734	16,178	16,849	18,501	19,112	19,736
Other	3,283	4,385	3,793	4,408	5,248	6,288	6,816	8,002	7,905	8,388
SEX										
Male	85,887	88,840	91,828	94,878	96,382	97,242	98,778	99,322	100,365	101,449
Female	94,456	97,600	100,776	103,468	104,806	105,617	106,935	107,877	109,046	110,083

*Low precision; no estimate reported.
-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years. Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

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Table 1N. Survey Sample Sizes for All Respondents Aged 12 and Older, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	7,224	5,624	8,021	8,814	9,259	32,594	28,832	26,489	17,809	17,747
AGE GROUP										
12-17	2,165	1,581	2,230	3,095	2,177	8,005	7,254	6,978	4,698	4,595
18-25	2,044	1,283	1,812	1,505	2,052	7,937	7,721	5,531	3,706	3,963
26-34	1,064	1,571	2,166	1,987	2,355	8,126	7,516	8,342	5,223	5,213
≥35	1,951	1,189	1,813	2,227	2,675	8,526	6,341	5,638	4,182	3,976
RACE/ETHNICITY										
White	5,862	4,532	3,960	4,551	5,241	15,648	14,080	12,478	8,663	8,459
Black	798	673	1,950	1,888	1,842	8,050	6,511	6,183	4,010	4,208
Hispanic	354	299	2,003	2,193	1,915	7,916	7,148	6,894	4,706	4,599
Other	210	120	108	182	261	980	1,093	934	430	481
SEX										
Male	3,357	2,637	3,516	3,938	4,165	14,422	12,988	12,059	7,950	7,652
Female	3,867	2,987	4,505	4,876	5,094	18,172	15,844	14,430	9,859	10,095

*Low precision; no estimate reported.

-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years. Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse

Table 2A. Estimated Numbers of Persons (in Thousands) in the U.S. Population Aged 12 and Older, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	21,773	22,208	28,027	27,820	36,588	35,975	123,023	125,529	209,411	211,532
RACE/ ETHNICITY										
White	14,996	15,142	19,361	19,117	26,345	25,577	98,327	99,886	159,029	159,722
Black	3,071	3,217	3,770	3,765	4,359	4,309	12,165	12,395	23,365	23,686
Hispanic	2,693	2,797	3,599	3,620	4,332	4,409	8,487	8,910	19,112	19,736
Other	1,012	1,053	1,298	1,317	1,551	1,681	4,044	4,337	7,905	8,388
SEX										
Male	11,137	11,358	13,872	13,772	17,899	17,592	57,457	58,727	100,365	101,449
Female	10,636	10,851	14,155	14,048	18,689	18,383	65,566	66,802	109,046	110,083
POPULATION DENSITY[1]										
Large Metro	9,067	9,168	12,839	12,349	17,635	17,281	53,463	54,379	93,004	93,177
Small Metro	7,743	7,104	8,523	9,232	12,532	11,154	41,291	40,437	70,090	67,926
Nonmetro	4,963	5,937	6,665	6,239	6,421	7,540	28,268	30,713	46,317	50,429
REGION										
Northeast	3,873	3,890	5,467	4,929	7,097	7,436	24,550	26,982	40,987	43,237
North Central	5,491	5,707	5,984	6,499	8,344	8,177	30,211	28,982	50,029	49,365
South	7,511	7,375	10,154	9,391	12,896	11,864	43,026	44,550	73,587	73,180
West	4,898	5,236	6,422	7,001	8,252	8,497	25,236	25,015	44,808	45,750
ADULT EDUCATION[2]										
<High School	N/A	N/A	5,546	5,410	5,484	5,366	26,838	25,032	37,869	35,808
High School Grad	N/A	N/A	10,119	9,683	11,819	12,025	39,621	43,849	61,559	65,558
Some College	N/A	N/A	8,791	8,686	8,893	8,631	26,909	24,329	44,593	41,646
College Graduate	N/A	N/A	3,571	4,040	10,392	9,953	29,655	32,319	43,618	46,312
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	12,858	13,129	25,010	24,481	58,242	61,653	96,110	99,262
Part-time	N/A	N/A	6,171	6,172	3,834	3,775	14,024	11,744	24,029	21,692
Unemployed	N/A	N/A	2,360	2,331	2,130	2,091	3,819	3,806	8,308	8,229
Other[3]	N/A	N/A	6,638	6,187	5,614	5,628	46,938	48,326	59,191	60,141

N/A: Not applicable.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.

[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥18.

[3] Retired, disabled, homemaker, student, or "other."

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 2N. Survey Sample Sizes for All Respondents Aged 12 and Older, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	4,698	4,595	3,706	3,963	5,223	5,213	4,182	3,976	17,809	17,747
RACE/ ETHNICITY										
White	2,249	2,205	1,735	1,774	2,594	2,620	2,085	1,860	8,663	8,459
Black	1,084	1,068	791	980	1,193	1,159	942	1,001	4,010	4,208
Hispanic	1,241	1,184	1,086	1,076	1,307	1,299	1,072	1,040	4,706	4,599
Other	124	138	94	133	129	135	83	75	430	481
SEX										
Male	2,352	2,318	1,729	1,756	2,167	2,030	1,702	1,548	7,950	7,652
Female	2,346	2,277	1,977	2,207	3,056	3,183	2,480	2,428	9,859	10,095
POPULATION DENSITY[1]										
Large Metro	2,347	1,959	1,901	1,885	2,714	2,628	2,044	2,048	9,006	8,520
Small Metro	1,356	1,547	1,022	1,305	1,524	1,619	1,191	1,198	5,093	5,669
Nonmetro	995	1,089	783	773	985	966	947	730	3,710	3,558
REGION										
Northeast	788	689	669	622	924	944	757	729	3,138	2,984
North Central	1,029	901	728	746	1,114	949	829	691	3,700	3,287
South	1,754	1,909	1,414	1,615	1,994	2,015	1,635	1,642	6,797	7,181
West	1,127	1,096	895	980	1,191	1,305	961	914	4,174	4,295
ADULT EDUCATION[2]										
<High School	N/A	N/A	1,055	1,020	1,233	1,112	1,064	1,065	3,352	3,197
High School Grad	N/A	N/A	1,378	1,439	1,834	1,806	1,354	1,301	4,566	4,546
Some College	N/A	N/A	979	1,099	1,193	1,227	897	797	3,069	3,123
College Graduate	N/A	N/A	294	405	963	1,068	867	813	2,124	2,286
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	1,667	1,727	3,275	3,282	2,404	2,225	7,346	7,234
Part-time	N/A	N/A	733	830	553	563	436	379	1,722	1,772
Unemployed	N/A	N/A	395	421	399	372	213	195	1,007	988
Other[3]	N/A	N/A	911	985	996	996	1,129	1,177	3,036	3,158

N/A: Not applicable.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.
[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥18.
[3] Retired, disabled, homemaker, student, or "other."
Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 3A. Estimated Numbers (in Thousands) of Lifetime Users of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population Aged 12 and Older: 1979-1995

Drug	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
Any Illicit Drug[1]	56,414[b]	--	66,172	67,457	68,838	69,256	68,528	70,776	71,935	72,426
Marijuana and Hashish	50,322[b]	53,312[b]	56,547[a]	60,755	61,266	61,900	62,075	64,149	65,229	65,545
Cocaine	15,541[b]	21,756	21,495	21,058	22,617	23,271	22,482	23,369	21,821	21,700
Crack	--	--	--	2,672[a]	2,967	4,194	3,010[a]	4,034	4,042	3,895
Inhalants	--	--	15,167[a]	12,646	11,562	12,300	10,988	12,240	12,178	12,016
Hallucinogens	16,016[a]	16,989	13,221[b]	15,165[b]	15,925[a]	17,007[a]	17,065	18,743	18,217	20,129
PCP	--	--	3,811[b]	4,143[b]	4,019[b]	4,936[a]	5,550	5,683	5,911	6,718
LSD	--	--	8,889[b]	11,874[b]	11,656[b]	13,045[a]	13,681	14,471	14,711	15,852
Heroin	2,324	1,771	1,826	1,749	1,517[a]	2,433	1,687	2,102	2,083	2,451
Nonmedical Use of Any Psychotherapeutic[2]	--	--	29,386[b]	22,258	22,731	24,053	22,552	21,793	20,926	21,446
Stimulants	--	--	14,139[a]	11,241	11,156	11,385	10,284	10,007	9,671	10,360
Sedatives	--	--	9,260[b]	5,206	5,609	6,482	5,309	5,320	5,460	5,760
Tranquilizers	--	--	14,692[b]	8,774	8,020	10,445	9,766	8,751	8,390	8,251
Analgesics	--	--	14,693	11,465	12,751	13,782	12,634	13,324	12,552	12,806
Any Illicit Drug other than Marijuana[1]	--	--	43,130	38,301	39,190	40,228	38,923	40,803	39,383	40,426
Alcohol	159,525	159,415	163,608	166,571	165,410	169,640	168,572	171,167	176,290	174,182
"Binge" Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Heavy Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Cigarettes	--	--	150,233	153,466	151,699	151,922	150,283	151,936	153,509	151,917
Smokeless Tobacco	--	--	--	36,551	35,193	35,420	37,538	32,862	36,042	35,899

*Low precision; no estimate reported.

-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years. Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[1] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

[a] Difference between estimate and 1995 estimate is statistically significant at the .05 level.

[b] Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

62

63

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Table 3B. Percentages Reporting Lifetime Use of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population Aged 12 and Older: 1979-1995

Drug	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
Any Illicit Drug[1]	31.3	--	34.4	34.0	34.2	34.1	33.3	34.2	34.4	34.2
Marijuana and Hashish	27.9	28.6	29.4	30.6	30.5	30.5	30.2	31.0	31.1	31.0
Cocaine	8.6	11.7	11.2	10.6	11.2	11.5	10.9	11.3	10.4	10.3
Crack	--	--	--	1.3	1.5	2.1	1.5	1.9	1.9	1.8
Inhalants	--	--	7.9[b]	6.4	5.7	6.1	5.3	5.9	5.8	5.7
Hallucinogens	8.9	9.1	6.9[b]	7.6[a]	7.9[a]	8.4	8.3	9.0	8.7	9.5
PCP	--	--	2.0[b]	2.1[b]	2.0[b]	2.4[a]	2.7	2.7	2.8	3.2
LSD	--	--	4.6[b]	6.0[a]	5.8[a]	6.4	6.7	7.0	7.0	7.5
Heroin	1.3	1.0	0.9	0.9	0.8	1.2	0.8	1.0	1.0	1.2
Nonmedical Use of Any Psychotherapeutic[2]	--	--	15.3[b]	11.2	11.3	11.9	11.0	10.5	10.0	10.1
Stimulants	--	--	7.3[b]	5.7	5.5	5.6	5.0	4.8	4.6	4.9
Sedatives	--	--	4.8[b]	2.6	2.8	3.2	2.6	2.6	2.6	2.7
Tranquilizers	--	--	7.6[b]	4.4	4.0	5.1[a]	4.7	4.2	4.0	3.9
Analgesics	--	--	7.6	5.8	6.3	6.8	6.1	6.4	6.0	6.1
Any Illicit Drug other than Marijuana[1]	--	--	22.4[a]	19.3	19.5	19.8	18.9	19.7	18.8	19.1
Alcohol	88.5*	85.5	84.9	84.0	82.2	83.6	81.9	82.6	84.2	82.3
"Binge" Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Heavy Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Cigarettes	--	--	78.0[a]	77.4	75.4	74.9	73.1	73.3	73.3	71.8
Smokeless Tobacco	--	--	--	18.4	17.5	17.5	18.2	15.9	17.2	17.0

*Low precision; no estimate reported.

-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

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[1] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

[a] Difference between estimate and 1995 estimate is statistically significant at the .05 level.

[b] Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

64

65

Table 4A. Estimated Numbers (in Thousands) of Past Year Users of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population Aged 12 and Older: 1979-1995

Drug	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
Any Illicit Drug[1]	31,485[b]	--	31,488[b]	24,577	23,449	22,612	20,046	21,402	22,663	22,662
Marijuana and Hashish	29,869[b]	29,685[b]	26,145[b]	19,492	18,931	18,067	16,322	17,510	17,813	17,755
Cocaine	8,608[b]	10,458[b]	9,839[b]	7,151[b]	5,442[a]	5,284[a]	4,332	3,947	3,664	3,664
Crack	--	--	--	1,459	1,463	1,451	1,144	1,416	1,258	1,018
Inhalants	--	--	2,657	2,441	2,212	2,379	1,889	1,940	2,213	2,308
Hallucinogens	5,260	4,149	3,198	3,200	2,350[a]	2,562	2,530[a]	2,479[a]	2,725[a]	3,416
PCP	--	--	455	167	136	172	207	199	206	322
LSD	--	--	--	--	--	--	--	--	1,651	2,108
Heroin	427	323	347	508	443	359	304	230	281	428
Nonmedical Use of Any Psychotherapeutic[2]	--	--	11,988[b]	9,151[a]	6,878	7,314	6,260	6,336	6,056	6,166
Stimulants	--	--	5,637[b]	3,698[b]	2,319	2,010	1,478	1,774	1,419	1,656
Sedatives	--	--	2,209[b]	1,376	991	946	802	702	736	666
Tranquilizers	--	--	6,181[b]	4,124[a]	2,376	3,143	2,851	2,380	2,405	2,210
Analgesics	--	--	6,921[b]	5,328	4,986	5,063	4,871	4,560	4,247	4,102
Any Illicit Drug other than Marijuana[1]	--	--	18,725[b]	14,884[b]	12,153	12,624	10,815	10,968	11,127	11,393
Alcohol	131,443	126,534	140,394	135,044	132,859	138,113	133,090	137,771	140,121	138,314
"Binge" Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Heavy Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Cigarettes	--	--	78,026	76,446	72,622	73,419	72,409	68,831	66,475	67,639
Smokeless Tobacco	--	--	--	11,140	10,924	10,704	11,416	9,168	10,017	9,667

*Low precision; no estimate reported.

-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years. Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[1] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

[a] Difference between estimate and 1995 estimate is statistically significant at the .05 level.

[b] Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

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Table 4B. Percentages Reporting Past Year Use of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population Aged 12 and Older: 1979-1995

Drug	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
Any Illicit Drug[1]	17.5[b]	--	16.3[b]	12.4	11.7	11.1	9.7	10.3	10.8	10.7
Marijuana and Hashish	16.6[b]	15.9[b]	13.6[b]	9.8	9.4	8.9	7.9	8.5	8.5	8.4
Cocaine	4.8[b]	5.6[b]	5.1[b]	3.6[b]	2.7[b]	2.6[b]	2.1	1.9	1.7	1.7
Crack	--	--	--	0.7	0.7	0.7	0.6	0.7	0.6	0.5
Inhalants	--	--	1.4	1.2	1.1	1.2	0.9	0.9	1.1	1.1
Hallucinogens	2.9[b]	2.2	1.7	1.6	1.2	1.3	1.2	1.2	1.3	1.6
PCP	--	--	0.2	0.1	0.1	0.1	0.1	0.1	0.1	0.2
LSD	--	--	--	--	--	--	--	--	0.8	1.0
Heroin	0.2	0.2	0.2	0.3	0.2	0.2	0.1	0.1	0.1	0.2
Nonmedical Use of Any Psychotherapeutic[2]	--	--	6.2[b]	4.6[b]	3.4	3.6	3.0	3.1	2.9	2.9
Stimulants	--	--	2.9[b]	1.9[b]	1.2	1.0	0.7	0.9	0.7	0.8
Sedatives	--	--	1.1[b]	0.7	0.5	0.5	0.4	0.3	0.4	0.3
Tranquilizers	--	--	3.2[b]	2.1[a]	1.2	1.5	1.4	1.1	1.1	1.0
Analgesics	--	--	3.6[b]	2.7	2.5	2.5	2.4	2.2	2.0	1.9
Any Illicit Drug other than Marijuana[1]	--	--	9.7[b]	7.5[b]	6.0	6.2	5.3	5.3	5.3	5.4
Alcohol	72.9[a]	67.9	72.9[a]	68.1	66.0	68.1	64.7	66.5	66.9	65.4
"Binge" Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Heavy Alcohol Use[3]	--	--	--	--	--	--	--	--	--	--
Cigarettes	--	--	40.5[b]	38.5[b]	36.1	36.2[a]	35.2	33.2	31.7	32.0
Smokeless Tobacco	--	--	--	5.6	5.4	5.3	5.5	4.4	4.8	4.6

*Low precision; no estimate reported.

-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census, NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years. Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[1] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

[a] Difference between estimate and 1995 estimate is statistically significant at the .05 level.

[b] Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

Table 5A. Estimated Numbers (in Thousands) of Past Month Users of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population Aged 12 and Older: 1979-1995

Drug	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
Any Illicit Drug[1]	25,399[b]	--	23,272[b]	15,192	13,526	13,368	12,033	12,256	12,553	12,823
Marijuana and Hashish	23,790[b]	21,507[b]	18,641[b]	12,353	10,913	10,366	9,676	9,610	10,112	9,842
Cocaine	4,743[b]	4,491[b]	5,686[b]	3,140[b]	1,720	2,032	1,402	1,404	1,382	1,453
Crack	--	--	--	673	686	666	436	579	520	420
Inhalants	--	--	1,156	810	787	806	586	589	799	896
Hallucinogens	3,382[a]	1,608	2,257	1,245	887	1,115	842[a]	826[a]	960[a]	1,469
PCP	--	--	*	*	*	*	16	29	34	40
LSD	--	--	--	--	--	--	--	--	436	548
Heroin	128	162	137	79	41	71	92	68	117	196
Nonmedical Use of Any Psychotherapeutic[2]	--	--	7,319[b]	4,076	3,433	3,934	3,124	3,189	2,566	2,601
Stimulants	--	--	3,407[b]	2,383[a]	1,300	906	688	976	678	798
Sedatives	--	--	964	468	339	468	430	315	222	421
Tranquilizers	--	--	4,282[b]	2,512[a]	1,216	2,232[a]	1,646	1,223	967	809
Analgesics	--	--	2,657[a]	1,361	1,816	1,723	1,828	1,675	1,542	1,264
Any Illicit Drug other than Marijuana[1]	--	--	11,832[b]	6,768	5,436	6,187	4,909	4,873	4,907	5,574
Alcohol	114,065	105,613	115,984	108,882	105,869	105,938	100,789	105,351	112,804	110,501
"Binge" Alcohol Use[3]	--	--	38,545	29,599	28,837	31,119	29,493	29,984	33,409	32,415
Heavy Alcohol Use[3]	--	--	15,757[a]	11,468	12,535	13,540	12,689	13,681	12,650	11,319
Cigarettes	--	--	74,545[a]	69,931	65,540	67,030	65,695	61,386	59,955	60,902
Smokeless Tobacco	--	--	--	7,769	7,810	7,562	8,283	6,694	6,838	6,907

•Low precision; no estimate reported.

-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

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[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

[a] Difference between estimate and 1995 estimate is statistically significant at the .05 level.

[b] Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

70

71

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Table 5B. Percentages Reporting Past Month Use of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population Aged 12 and Older: 1979-1995

Drug	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
Any Illicit Drug[1]	14.1[b]	--	12.1[b]	7.7	6.7	6.6	5.8	5.9	6.0	6.1
Marijuana and Hashish	13.2[b]	11.5[b]	9.7[b]	6.2[a]	5.4	5.1	4.7	4.6	4.8	4.7
Cocaine	2.6[b]	2.4[b]	3.0[b]	1.6[b]	0.9	1.0	0.7	0.7	0.7	0.7
Crack	--	--	--	0.3	0.3	0.3	0.2	0.3	0.2	0.2
Inhalants	--	--	0.6	0.4	0.4	0.4	0.3	0.3	0.4	0.4
Hallucinogens	1.9[a]	0.9	1.2	0.6	0.4	0.5	0.4[a]	0.4[a]	0.5[a]	0.7
PCP	--	--	*	*	*	*	0.0	0.0	0.0	0.0
LSD	--	--	--	--	--	--	--	--	0.2	0.3
Heroin	0.1	0.1	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.1
Nonmedical Use of Any Psychotherapeutic[2]	--	--	3.8[b]	2.1[a]	1.7	1.9	1.5	1.5	1.2	1.2
Stimulants	--	--	1.8[b]	1.2[a]	0.6	0.4	0.3	0.5	0.3	0.4
Sedatives	--	--	0.5	0.2	0.2	0.2	0.2	0.2	0.1	0.2
Tranquilizers	--	--	2.2[b]	1.3[a]	0.6	1.1[a]	0.8	0.6	0.5	0.4
Analgesics	--	--	1.4[a]	0.7	0.9	0.8	0.9	0.8	0.7	0.6
Any Illicit Drug other than Marijuana[1]	--	--	6.1[b]	3.4	2.7	3.0	2.4	2.4	2.3	2.6
Alcohol	63.2[b]	56.6	60.2[b]	54.9	52.6	52.2	49.0	50.8	53.9	52.2
"Binge" Alcohol Use[3]	--	--	20.2[b]	15.0	14.4	15.5	14.5	14.6	16.5	15.8
Heavy Alcohol Use[3]	--	--	8.3[a]	5.8	6.3	6.8	6.2	6.7	6.2	5.5
Cigarettes	--	--	38.7[b]	35.3[b]	32.6	33.0[a]	31.9	29.6	28.6	28.8
Smokeless Tobacco	--	--	--	3.9	3.9	3.7	4.0	3.2	3.3	3.3

*Low precision; no estimate reported.
-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

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[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

[a] Difference between estimate and 1995 estimate is statistically significant at the .05 level.

[b] Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

Table 6. Percentages Reporting Past Month Use of Any Illicit Drug, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	14.1[b]	--	12.1[b]	7.7	6.7	6.6	5.8	5.9	6.0	6.1
AGE GROUP										
12-17	16.3[a]	--	13.2	8.1	7.1[b]	5.8[b]	5.3[b]	5.7[b]	8.2[b]	10.9
18-25	38.0[b]	--	25.3[b]	17.9	15.0	15.4	13.1	13.6	13.3	14.2
26-34	20.8[b]	--	23.1[b]	14.7[b]	10.9	10.0	11.4	9.5	8.5	8.3
≥35	2.8	--	3.9	2.3	3.1	3.4	2.5	3.0	3.2	2.8
RACE/ETHNICITY										
White	14.2[b]	--	12.3[b]	7.7	6.9	6.5	6.1	6.1	6.0	6.0
Black	13.3[a]	--	12.7[b]	6.6	7.3	8.1	5.6[a]	5.8[a]	7.3	7.9
Hispanic	12.9[b]	--	8.9[b]	6.9	5.6	5.3	4.4	5.2	5.4	5.1
Other	15.1[b]	--	10.7	*	3.4	6.0	3.9	4.3	3.1	4.0
SEX										
Male	19.2[b]	--	14.9[b]	9.4	8.2	7.9	7.6	7.7	7.9	7.8
Female	9.4[b]	--	9.5[b]	6.0	5.3	5.4	4.2	4.3	4.3	4.5

*Low precision, no estimate reported.
-- Not available.

NOTE: Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

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Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

74

75

Table 7. Percentages Reporting Past Month Use of Marijuana, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	13.2[b]	11.5[b]	9.7[b]	6.2[a]	5.4	5.1	4.7	4.6	4.8	4.7
AGE GROUP										
12-17	14.2[a]	9.9	10.2	5.4[a]	4.4[b]	3.6[b]	3.4[b]	4.0[b]	6.0[b]	8.2
18-25	35.6[b]	27.2[b]	21.7[b]	15.3	12.7	12.9	10.9	11.1	12.1	12.0
26-34	19.7[b]	19.0[b]	19.0[b]	12.3[a]	9.5	7.7	9.3	7.5	6.9	6.7
≥35	2.9	3.9	2.6	1.8	2.4	2.6	2.0	2.4	2.3	1.8
RACE/ETHNICITY										
White	13.6[b]	11.9[b]	10.0[b]	6.3	5.7	5.2	5.1	4.9	4.8	4.7
Black	11.0[a]	11.5[a]	9.9[a]	4.7	5.1	5.5	3.9[a]	4.2	5.9	5.9
Hispanic	11.4[a]	8.6	6.4[a]	4.9	3.9	3.6	3.0	3.9	4.1	3.9
Other	12.2[b]	*	7.6	*	*	4.2	2.6	3.2	3.0	2.8
SEX										
Male	18.1[b]	16.4[b]	12.6[b]	8.4[a]	6.8	6.8	6.4	6.4	6.7	6.2
Female	8.7[b]	7.1[b]	7.1[b]	4.2	4.2	3.6	3.1	3.0	3.1	3.3

*Low precision; no estimate reported.
-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

77

76

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Table 8. Percentages Reporting Past Month Use of Cocaine, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	2.6[b]	2.4[b]	3.0[b]	1.6[b]	0.9	1.0	0.7	0.7	0.7	0.7
AGE GROUP										
12-17	1.5	1.9	1.5	1.2	0.6	0.4	0.3[a]	0.4	0.3[a]	0.8
18-25	9.9[b]	7.0[b]	8.1[b]	4.8[b]	2.3	2.2	2.0	1.6	1.2	1.3
26-34	3.0[a]	3.5[b]	6.3[b]	2.8[a]	1.9	1.9	1.5	1.0	1.3	1.2
≥35	0.2	0.5	0.5	0.4	0.2	0.5	0.2	0.4	0.4	0.4
RACE/ETHNICITY										
White	2.4[b]	2.5[b]	3.0[b]	1.4[a]	0.6	0.7	0.6	0.5	0.5	0.6
Black	2.8	2.4	3.4[b]	2.2	1.8	1.9[a]	1.0	1.4	1.3	1.1
Hispanic	4.8[a]	1.5	2.5[b]	2.8[a]	2.0[a]	1.7[b]	1.3	1.2	1.1	0.7
Other	3.5[a]	*	*	1.7	*	2.1	0.1	*	*	0.3
SEX										
Male	3.5[b]	3.4[b]	3.9[b]	2.2[b]	1.2	1.4	1.0	1.0	0.9	1.0
Female	1.8[b]	1.5[b]	2.1[b]	1.0[a]	0.6	0.6	0.4	0.4	0.4	0.4

*Low precision; no estimate reported.
-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

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Table 9. Percentages Reporting Past Month Use of Alcohol, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	63.2[b]	56.6	60.2[b]	54.9	52.6	52.2	49.0	50.8	53.9	52.2
AGE GROUP										
12-17	49.6[b]	34.9[b]	41.2[b]	33.4[b]	32.5[b]	27.0[a]	20.9	23.9	21.6	21.1
18-25	75.1[b]	66.6	70.1	64.7	62.8	63.1	58.6	58.7	63.1	61.3
26-34	71.6[a]	71.5[a]	70.6	65.3	64.4	62.7	62.3	63.8	65.3	63.0
≥35	59.7	53.0	57.5	52.6	49.5	50.4	47.4	49.8	54.1	52.6
RACE/ETHNICITY										
White	64.4[a]	58.4	62.8	56.7	54.6	54.0	50.9	54.0	56.7	55.6
Black	58.8[b]	49.4	50.6[b]	47.8[a]	47.0	47.2[a]	42.8	40.5	43.8	40.8
Hispanic	58.6[b]	53.1	49.3	48.1	45.8	46.3	43.7	44.3	47.7	45.2
Other	50.9	*	*	*	37.7	42.4	39.2	33.0	42.0	36.9
SEX										
Male	72.4[b]	66.8	69.2[a]	62.3	60.5	59.6	57.2	58.7	60.3	60.1
Female	54.9[b]	47.4	52.0[a]	48.1	45.4	45.4	41.4	43.6	47.9	45.0

*Low precision, no estimate reported.
-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

80

81

Table 10. Percentages Reporting Past Month "Binge" Alcohol Use, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	--	--	20.2[b]	15.0	14.4	15.5	14.5	14.6	16.5	15.8
AGE GROUP										
12-17	--	--	21.9[b]	15.1[a]	15.4[a]	13.2[a]	10.0	11.0	8.3	7.9
18-25	--	--	34.4	28.2	29.5	31.2	29.9	29.1	33.6	29.9
26-34	--	--	27.5	19.7	21.1	21.5	22.8	21.9	24.0	24.0
≥35	--	--	12.9	9.7	8.0[a]	10.1	9.0	9.6	11.8	11.8
RACE/ETHNICITY										
White	--	--	21.6[a]	15.8	14.9	16.2	15.3	15.6	17.1	16.6
Black	--	--	12.1	8.9	11.1	11.0	10.3	9.0	11.5	11.2
Hispanic	--	--	19.1	15.7	16.9	18.4	16.3	17.2	18.3	17.2
Other	--	--	11.1	13.7	4.7[a]	9.6	7.6	6.5	13.0	9.7
SEX										
Male	--	--	31.6[b]	23.2	22.1	23.5	21.9	22.7	24.7	23.8
Female	--	--	9.8	7.5	7.3	8.3	7.7	7.3	8.9	8.5

*Low precision, no estimate reported.
-- Not available.

NOTE: "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

82 83

Table 11. Percentages Reporting Past Month Heavy Alcohol Use, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	--	--	8.3[a]	5.8	6.3	6.8	6.2	6.7	6.2	5.5
AGE GROUP										
12-17	--	--	9.5	4.0	4.4	6.0	3.4	3.4	2.5	2.8
18-25	--	--	13.8	12.0	14.9	15.2	15.1	14.0	13.2	12.0
26-34	--	--	11.5	7.1	8.2	7.9	8.5	8.5	8.0	7.9
≥35	--	--	5.2	4.0	3.7	4.4	3.9	5.0	4.8	3.9
RACE/ETHNICITY										
White	--	--	9.1[a]	6.3	6.7	7.2	6.8	7.5	6.4	5.7
Black	--	--	3.5	2.8[a]	4.1	4.3	3.5	3.3	4.8	4.6
Hispanic	--	--	7.1	5.3	5.9	6.8	6.3	6.0	7.3	6.3
Other	--	--	*	3.9	*	3.3	2.2	1.9	4.7	2.4
SEX										
Male	--	--	13.8[a]	10.2	10.8	10.8	10.1	11.9	10.3	9.4
Female	--	--	3.2[a]	1.8	2.1	3.1[a]	2.7	1.9	2.5	2.0

*Low precision, no estimate reported.
-- Not available.

NOTE: "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census, NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

84 85

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Table 12. Percentages Reporting Past Month Use of Cigarettes, by Age Group, Race/Ethnicity, and Sex: 1979-1995

Demographic Characteristics	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
TOTAL	--	--	38.7[b]	35.3[b]	32.6	33.0[a]	31.9	29.6	28.6	28.8
AGE GROUP										
12-17	--	--	29.4[a]	22.7	22.4	20.9	18.4	18.5	18.9	20.2
18-25	--	--	47.4[b]	45.6[b]	40.9	41.7	41.5	37.9	34.6	35.3
26-34	--	--	45.7[b]	42.1[a]	42.4[a]	37.3	38.2	34.2	32.4	34.7
≥35	--	--	35.5[a]	32.4	28.9	31.6	30.0	28.2	27.9	27.2
RACE/ETHNICITY										
White	--	--	38.9[b]	35.2[a]	33.6	33.5	32.8	30.3	29.4	29.7
Black	--	--	38.0[b]	34.2	29.9	31.2	29.8	26.2	28.4	28.1
Hispanic	--	--	40.0[b]	35.6[b]	28.5	33.6[b]	29.2	29.0	25.8	24.7
Other	--	--	*	*	25.7	28.0	25.4	27.6	20.5	23.5
SEX										
Male	--	--	43.4[b]	39.5[b]	36.0[a]	35.2	34.1	32.2	31.5	31.0
Female	--	--	34.5[b]	31.4[a]	29.4	31.1[a]	30.0	27.3	26.0	26.8

*Low precision; no estimate reported.
-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, some adjusted estimates of past year use may appear to be greater then adjusted lifetime estimates. These inconsistencies tend to be small, rare and not statistically significant.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse.

86

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87

Table 13A. Estimated Numbers (in Thousands) of Marijuana, Cocaine, and Alcohol Users in the U.S. Population Aged 12 and Older, by Past Year Frequency of Use: 1985-1995

Drug/Frequency of Use in Past Year	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
MARIJUANA										
Fewer than 12 days[1]	--	--	12,824[b]	9,429	10,234	9,564	8,216	9,001	9,272	8,584
12 or more days[1,2]	--	--	14,153[b]	10,480	9,054	8,575	8,198	8,517	8,541	9,171
51 or more days[1]	--	--	8,423[b]	6,298	5,187	4,880	4,914	4,816	5,139	5,316
COCAINE										
Fewer than 12 days[1]	--	--	7,141[b]	5,121[b]	3,656	3,837[a]	3,042	2,688	2,408	2,486
12 or more days[1,2]	--	--	2,722[b]	2,045[a]	1,789	1,460	1,297	1,262	1,255	1,178
51 or more days[1]	--	--	781	1,112	855	806	829	615	734	582
ALCOHOL										
Fewer than 12 days[1]	--	--	47,957	47,056	53,349	54,239	55,779	55,057	55,126	53,967
12 or more days[1,2]	--	--	93,190	88,724	80,136	84,455	77,825	83,354	84,995	84,346
51 or more days[1]	--	--	53,364	47,126	41,558	42,787	41,497	44,359	45,662	48,639

*Low precision, no estimate reported.
-- Not available.

NOTE The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, the number of past year users of a drug shown here from the frequency of use in the past year question may differ from the estimated number of past year users based on the recency of use question. These inconsistencies tend to be small, rare and not statistically significant.

[1] For 1993 and earlier, "occasional" use is equivalent to use in the past year but on "fewer than 12 days" in this table. Also for 1993 and earlier, "monthly" use is equivalent to use on "12 or more days" in the past year in this table and "weekly" use is equivalent to use on "51 or more days" in the past year in this table.

[2] The category of use on "12 or more days" includes "51 or more days" used; the sum of "fewer than 12 days and "12 or more days" users equals all past year users.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office Of Applied Studies, National Household Survey on Drug Abuse.

Table 13B. Percentages Reporting Marijuana, Cocaine, and Alcohol Use in the U.S. Population Aged 12 and Older, by Past Year Frequency of Use: 1985-1995

Drug/Frequency of Use in Past Year	1979	1982	1985	1988	1990	1991	1992	1993	1994	1995
MARIJUANA										
Fewer than 12 days[1]	--	--	6.7[b]	4.8	5.1[a]	4.7	4.0	4.3	4.4	4.1
12 or more days[1,2]	--	--	7.3[b]	5.3	4.5	4.2	4.0	4.1	4.1	4.3
51 or more days[1]	--	--	4.4[b]	3.2	2.6	2.4	2.4	2.3	2.5	2.5
COCAINE										
Fewer than 12 days[1]	--	--	3.7[b]	2.6[b]	1.8[a]	1.9[a]	1.5	1.3	1.2	1.2
12 or more days[1,2]	--	--	1.4[b]	1.0[a]	0.9	0.7	0.6	0.6	0.6	0.6
51 or more days[1]	--	--	0.4	0.6	0.4	0.4	0.4	0.3	0.4	0.3
ALCOHOL										
Fewer than 12 days[1]	--	--	24.9	23.7	26.5	26.7	27.1	26.6	26.3	25.5
12 or more days[1,2]	--	--	48.4[b]	44.7[a]	39.8	41.6	37.8	40.2	40.6	39.9
51 or more days[1]	--	--	27.7[a]	23.8	20.7	21.1	20.2	21.4	21.8	23.0

•Low precision; no estimate reported.
-- Not available.

NOTE: The population distributions for the 1993, 1994, and 1995 NHSDAs are post-stratified to population projections of totals based on the 1990 decennial census. The 1979 NHSDA used population projections based on the 1970 census; NHSDAs from 1982 through 1992 used projections based on the 1980 census. The change from one census base to another has little effect on estimated percentages reporting drug use, but may have significant effect on estimates of number of drug users in some subpopulation groups.

NOTE: Estimates for 1979 through 1993 may differ from estimates for these survey years that were published in other NHSDA reports. The estimates shown here for 1979 through 1993 have been adjusted to improve their comparability with estimates based on the new version of the NHSDA instrument that was fielded in 1994 and subsequent NHSDAs. For 1979 and 1982, estimates are not shown (as indicated by --) where (a) the relevant data were not collected, or (b) the data for those drugs were based on measures that differed appreciably from those used in the other survey years. Consequently, adjustments to the 1979 and 1982 data were made only for those drugs whose measures were comparable to those in the other survey years.

Because of the methodology used to adjust the 1979 through 1993 estimates, some logical inconsistency may exist between estimates for a given drug within the same survey year. For example, the number of past year users of a drug shown here from the frequency of use in the past year question may differ from the estimated number of past year users based on the recency of use question. These inconsistencies tend to be small, rare and not statistically significant.

[1] For 1993 and earlier, "occasional" use is equivalent to use in the past year but on "fewer than 12 days" in this table. Also for 1993 and earlier, "monthly" use is equivalent to use on "12 or more days" in the past year in this table and "weekly" use is equivalent to use on "51 or more days" in the past year in this table.

[2] The category of use on "12 or more days" includes "51 or more days" used; the sum of "fewer than 12 days and "12 or more days" users equals all past year users.

[a]Difference between estimate and 1995 estimate is statistically significant at the .05 level.
[b]Difference between estimate and 1995 estimate is statistically significant at the .01 level.

Source: SAMHSA, Office Of Applied Studies, National Household Survey on Drug Abuse.

90

91

Table 14. Percentages Reporting Past Month Use of Any Illicit Drug, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	8.2[b]	10.9	13.3	14.2	8.5	8.3	3.2	2.8	6.0	6.1
RACE/ ETHNICITY										
White	8.5[b]	11.2	14.6	15.5	9.0	8.9	3.1	2.7	6.0	6.0
Black	8.3	10.7	12.8	13.5	10.2	9.1	4.4	5.0	7.3	7.9
Hispanic	8.1	9.4	9.1	8.2	5.7	6.3	2.9	1.9	5.4	5.1
Other	2.7*	11.2	*	14.5	3.2	1.5	*	*	3.1	4.0
SEX										
Male	8.5[b]	12.1	17.1	17.0	11.6	11.2	4.3	3.8	7.9	7.8
Female	7.8	9.6	9.6	11.5	5.6	5.5	2.2	1.9	4.3	4.5
POPULATION DENSITY[1]										
Large Metro	7.6*	10.3	14.0	15.5	9.1	8.9	3.0	2.3	6.1	6.1
Small Metro	10.4	11.4	13.5	15.1	8.3	9.1	3.9	3.2	6.6	6.6
Nonmetro	5.7[b]	11.2	11.8	10.5	7.5	5.8	2.4	2.9	4.8	5.3
REGION										
Northeast	6.8	9.1	10.8*	16.9	7.8	6.3	2.7	1.7	5.1	4.9
North Central	9.2*	12.8	13.8	12.3	8.7	8.5	2.8	3.0	5.8	6.3
South	7.7	9.5	14.2	12.4	8.5	8.2	3.5	2.7	6.3	5.5
West	8.8*	12.0	13.6	16.5	9.0	10.0	3.5	3.8	6.6	7.8
ADULT EDUCATION[2]										
<High School	N/A	N/A	15.8	18.0	13.3	12.7	2.2	2.9	5.8	6.7
High School Grad	N/A	N/A	12.8	15.3	9.3	8.5	3.2	2.9	5.9	5.7
Some College	N/A	N/A	14.0	13.6	7.7	8.8	3.5	2.9	6.4	6.4
College Graduate	N/A	N/A	9.3	7.6	5.8	5.2	3.8	2.4	4.7	3.5
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	12.4	13.2	8.6	7.8	4.6*	2.9	6.7*	5.5
Part-time	N/A	N/A	12.8	15.8	7.5	9.3	3.8	5.3	6.7	9.0
Unemployed	N/A	N/A	19.9	22.1	16.4	19.8	8.9	6.6	13.9	14.3
Other[3]	N/A	N/A	13.3	11.8	5.8	5.7	0.8	1.7	2.7	3.1

*Low precision; no estimate reported.
N/A: Not applicable.
NOTE: Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.
[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.
[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥ 18.
[3] Retired, disabled, homemaker, student, or "other."
[a]Difference between 1994 and 1995 is statistically significant at the .05 level.
[b]Difference between 1994 and 1995 is statistically significant at the .01 level.
Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 15. Percentages Reporting Past Month Use of Marijuana, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	6.0[b]	8.2	12.1	12.0	6.9	6.7	2.3	1.8	4.8	4.7
RACE/ ETHNICITY										
White	6.2[a]	8.4	13.3	13.1	7.4	7.4	2.3	1.8	4.8	4.7
Black	6.4	7.6	12.0	12.1	7.4	7.4	3.4	3.1	5.9	5.9
Hispanic	6.0	7.7	7.7	7.1	4.5	4.2	1.8	1.2	4.1	3.9
Other	2.1	9.3	*	8.3	3.2	1.5	*	*	3.0	2.8
SEX										
Male	6.8[a]	9.0	15.6	14.8	9.9	9.6	3.5	2.6	6.7	6.2
Female	5.2[a]	7.4	8.7	9.2	4.0	4.0	1.3	1.1	3.1	3.3
POPULATION DENSITY[1]										
Large Metro	5.8[a]	8.5	12.7	13.2	7.4	7.3	2.2	1.6	5.0	4.9
Small Metro	7.8	7.9	12.4	12.3	6.4	7.3	3.2	2.3	5.4	5.1
Nonmetro	3.8[a]	8.1	10.4	8.9	6.4	4.8	1.4	1.4	3.7	3.6
REGION										
Northeast	5.4	7.7	10.1[a]	15.5	7.0	5.0	2.1	1.2	4.3	4.1
North Central	7.4	10.2	11.9	10.2	6.9	7.0	2.1	1.8	4.6	4.7
South	5.2	6.7	13.1	10.3	6.5	6.8	2.8	1.6	5.1	4.1
West	6.4	8.7	12.4	13.3	7.4	7.9	2.2	2.8	5.1	6.0
ADULT EDUCATION[2]										
<High School	N/A	N/A	14.8	15.3	10.7	10.8	1.4	1.4	4.7	4.9
High School Grad	N/A	N/A	11.3	12.3	7.4	7.0	2.0	1.6	4.6	4.2
Some College	N/A	N/A	12.5	11.6	6.1	6.8	3.0	2.2	5.5	5.1
College Graduate	N/A	N/A	9.3	7.5	5.0	4.2	3.1	2.1	4.0	3.0
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	10.9	10.9	7.3	6.3	3.6[a]	2.0	5.5[a]	4.2
Part-time	N/A	N/A	11.5	14.0	5.3	8.1	2.7	3.9	5.4	7.5
Unemployed	N/A	N/A	18.8	19.8	12.2	17.1	5.0	5.8	10.8	12.6
Other[3]	N/A	N/A	12.5	9.3	4.2	3.8	0.5	0.7	2.2	1.9

*Low precision, no estimate reported.
N/A: Not applicable.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.
[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.
[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥ 18.
[3] Retired, disabled, homemaker, student, or "other."
[a]Difference between 1994 and 1995 is statistically significant at the .05 level.
[b]Difference between 1994 and 1995 is statistically significant at the .01 level.
Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

94 95

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Table 16. Percentages Reporting Past Month Use of Cocaine, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	0.3*	0.8	1.2	1.3	1.3	1.2	0.4	0.4	0.7	0.7
RACE/ ETHNICITY										
White	0.3	0.9	1.2	1.5	1.1	1.0	0.3	0.3	0.5	0.6
Black	0.1	0.1	0.7	0.7	3.2	1.8	1.1	1.2	1.3	1.1
Hispanic	0.7	0.8	2.2	1.1	1.4	1.7	0.7*	0.1	1.1	0.7
Other	•	•	•	•	•	•	•	•	•	0.3
SEX										
Male	0.3	0.8	1.9	1.7	1.9	1.6	0.5	0.6	0.9	1.0
Female	0.3	0.7	0.6	0.9	0.8	0.8	0.3	0.2	0.4	0.4
POPULATION DENSITY[1]										
Large Metro	0.4	0.9	1.1	1.2	1.5	1.3	0.5	0.4	0.8	0.7
Small Metro	0.2	1.0	1.5	1.3	1.0	1.3	0.4	0.5	0.6	0.8
Nonmetro	0.4	0.4	1.0	1.5	1.3	0.6	0.2	0.3	0.5	0.5
REGION										
Northeast	•	0.2	1.0	1.5	0.7	1.5	0.4	•	0.5	0.5
North Central	0.3	1.3	1.2	1.3	1.3	0.8	0.4	0.4	0.6	0.7
South	0.3	0.6	1.2	1.6	1.6	1.4	0.4	0.5	0.7	0.8
West	0.6	0.8	1.5	0.7	1.3	1.0	0.4	0.5	0.8	0.7
ADULT EDUCATION[2]										
<High School	N/A	N/A	2.6	1.7	2.8	2.5	0.8	0.8	1.4	1.2
High School Grad	N/A	N/A	1.2	1.5	1.5	1.2	0.2	0.5	0.6	0.8
Some College	N/A	N/A	0.7	1.0	0.9	1.0	0.6	0.4	0.7	0.6
College Graduate	N/A	N/A	0.4	1.1	0.6	0.5	•	•	0.2	0.2
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	1.2	1.4	1.2	1.0	0.4	0.4	0.7	0.7
Part-time	N/A	N/A	1.0	1.6	1.8	0.6	0.3	0.4	0.7	0.8
Unemployed	N/A	N/A	3.3	1.9	3.7	5.0	3.5	•	3.5	2.1
Other[3]	N/A	N/A	0.9	0.5	0.7	1.0	0.2	0.3	0.3	0.4

*Low precision; no estimate reported.

N/A: Not applicable.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.

[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥ 18.

[3] Retired, disabled, homemaker, student, or "other."

*Difference between 1994 and 1995 is statistically significant at the .05 level.

*Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 17. Percentages Reporting Past Month Use of Alcohol, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	21.6	21.1	63.1	61.3	65.3	63.0	54.1	52.6	53.9	52.2
RACE/ ETHNICITY										
White	23.9	22.9	68.2	66.7	68.6	67.5	56.2	55.4	56.7	55.6
Black	18.2	15.5	51.5	47.8	59.2	55.0	42.4	40.2	43.8	40.8
Hispanic	18.3	18.7	53.6	49.3	56.6	53.5	50.0	47.8	47.7	45.2
Other	7.4*	18.7	*	*	50.6	*	*	*	42.0	36.9
SEX										
Male	22.1	22.5	70.9	68.2	73.9	70.3	60.9	62.4	60.3	60.1
Female	21.1	19.6	55.3	54.7	57.1	56.0	48.1	44.1	47.9	45.0
POPULATION DENSITY[1]										
Large Metro	21.2	20.6	61.6	62.4	66.8	66.8	58.0	57.5	56.6	56.3
Small Metro	22.1	20.1	64.8	61.4	66.8	62.7	54.6	51.7	54.4	51.5
Nonmetro	21.9	23.0	63.7	59.1	58.4	54.9	45.9	45.3	47.6	45.8
REGION										
Northeast	19.9	21.2	61.1*	67.9	70.2	64.1	56.9	53.4	56.3	54.0
North Central	22.5	24.1	65.8	65.4	67.5	68.1	57.3	61.2	56.2	58.6
South	21.4	19.6	62.5	59.2	61.6	59.5	47.9	45.1	49.6	46.7
West	22.4	19.8	63.1	55.8	64.7	62.1	58.0	55.3	56.0	52.6
ADULT EDUCATION[2]										
<High School	N/A	N/A	52.1	53.1	57.0	55.3	39.1	36.1	43.6	41.5
High School Grad	N/A	N/A	57.9	57.9	62.8	61.0	51.6	48.9	54.8	52.4
Some College	N/A	N/A	68.9	64.5	66.0	62.0	58.4	58.3	62.0	60.4
College Graduate	N/A	N/A	80.4	74.1	72.0	70.6	66.9	66.3	69.2	67.9
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	70.4	69.2	70.5	67.5	62.4	62.0	65.6	64.3
Part-time	N/A	N/A	61.0	56.4	60.1	55.9	67.9*	57.2	64.9*	56.8
Unemployed	N/A	N/A	55.5	59.6	65.2	62.7	57.7	64.8	59.0	62.8
Other[3]	N/A	N/A	53.4	50.2	46.0	48.5	39.3	38.6	41.5	40.8

*Low precision; no estimate reported.

N/A: Not applicable.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.

[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥ 18.

[3] Retired, disabled, homemaker, student, or "other."

*Difference between 1994 and 1995 is statistically significant at the .05 level.

*Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 18. Percentages Reporting Past Month "Binge" Alcohol Use, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	8.3	7.9	33.6	29.9	24.0	24.0	11.8	11.8	16.5	15.8
RACE/ ETHNICITY										
White	10.4	8.9	39.5[a]	34.2	26.1	26.7	11.4	11.9	17.1	16.6
Black	3.5	3.0	16.5	15.7	16.3	15.7	10.4	10.5	11.5	11.2
Hispanic	4.8	7.4	25.9	22.7	23.6	21.4	16.8	16.1	18.3	17.2
Other	*	8.7	16.0	27.0	9.6	10.3	*	*	13.0	9.7
SEX										
Male	9.5	9.4	46.6	41.2	36.2	35.5	19.0	18.9	24.7	23.8
Female	7.1	6.2	21.1	18.9	12.5	13.0	5.5	5.5	8.9	8.5
POPULATION DENSITY[1]										
Large Metro	8.3	6.8	32.4	30.2	24.8	24.3	12.7	12.8	17.2	16.6
Small Metro	7.8	6.8	33.8	29.2	24.0	25.9	13.0	11.6	16.9	15.9
Nonmetro	9.2	10.8	35.9	30.3	22.0	20.6	8.4	10.2	14.4	14.3
REGION										
Northeast	7.0	7.1	30.2	30.5	25.3	22.3	12.1	9.3	16.3	13.8
North Central	8.6	8.8	38.2	35.6	28.2	29.1	12.1	16.0	17.5	19.9
South	8.1	7.8	34.2	28.0	22.2	23.3	12.1	9.7	16.5	14.1
West	9.3	7.5	31.4	26.8	21.6	21.8	10.8	13.1	15.5	16.1
ADULT EDUCATION[2]										
<High School	N/A	N/A	30.2	27.3	27.5	27.0	11.5	9.6	16.6	14.9
High School Grad	N/A	N/A	29.9	27.8	24.5	24.0	12.5	13.1	17.7	17.2
Some College	N/A	N/A	39.7	32.8	22.3	22.3	13.4	13.5	20.3	19.4
College Graduate	N/A	N/A	34.8	32.0	23.1	24.1	9.8	10.4	15.0	15.2
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	38.2	34.9	27.7	27.4	15.5	16.2	21.7	21.5
Part-time	N/A	N/A	33.2[b]	23.5	17.0	16.4	12.1	11.1	18.3	15.5
Unemployed	N/A	N/A	29.6	32.8	27.5	27.9	22.7	23.4	25.9	27.2
Other[3]	N/A	N/A	26.8	24.5	11.2	13.2	6.3	5.5	9.1	8.1

*Low precision; no estimate reported.

N/A: Not applicable.

NOTE: "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.

[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥ 18.

[3] Retired, disabled, homemaker, student, or "other."

[a] Difference between 1994 and 1995 is statistically significant at the .05 level.

[b] Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 19. Percentages Reporting Past Month Heavy Alcohol Use, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	2.5	2.8	13.2	12.0	8.0	7.9	4.8	3.9	6.2	5.5
RACE/ ETHNICITY										
White	3.0	3.2	15.7	14.1	8.4	8.6	4.6	3.8	6.4	5.7
Black	1.4	0.9	7.0	5.5	6.4	6.3	4.5	4.8	4.8	4.6
Hispanic	1.6	2.3	8.7	8.0	8.6	8.1	7.9	6.0	7.3	6.3
Other	*	3.0	5.2	9.1	4.0	1.5	*	*	4.7	2.4
SEX										
Male	3.1	3.5	20.3	19.1	13.5	13.0	8.3	7.2	10.3	9.4
Female	1.9	1.9	6.3	5.0	2.8	3.0	1.7*	1.0	2.5	2.0
POPULATION DENSITY[1]										
Large Metro	2.3	2.3	10.9	12.5	8.3	7.5	4.8	3.9	6.1	5.6
Small Metro	2.3	2.3	14.7	11.8	7.1	9.4	5.8	4.2	6.7	5.9
Nonmetro	3.5	4.0	15.7	11.1	8.6	6.7	3.4	3.5	5.9	4.9
REGION										
Northeast	1.6	2.3	11.8	13.8	6.8	6.8	4.7	3.0	5.7	4.9
North Central	2.9	3.5	13.9	15.4	10.7	10.0	5.5	5.0	7.1	7.0
South	2.9	2.9	13.4	11.7	8.4	7.5	5.1*	3.0	6.6*	4.8
West	2.4	2.2	13.3*	7.8	5.6	7.4	3.6	5.2	5.2	5.6
ADULT EDUCATION[2]										
<High School	N/A	N/A	14.4*	10.1	12.2	12.7	6.1	5.3	8.2	7.1
High School Grad	N/A	N/A	13.0	11.3	8.5	8.3	5.5	5.5	7.3	6.9
Some College	N/A	N/A	14.7	13.4	7.0	6.8	5.2*	2.3	7.4	5.6
College Graduate	N/A	N/A	8.2	13.0	6.0	5.8	2.4	1.9	3.7	3.7
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	14.2	13.4	9.3	8.4	5.7	5.2	7.8	7.1
Part-time	N/A	N/A	11.5	9.0	5.9	6.2	4.8	5.0	6.7	6.3
Unemployed	N/A	N/A	14.3	14.0	9.8	13.4	10.3	6.9	11.3	10.6
Other[3]	N/A	N/A	12.4	11.1	2.8	4.7	3.3	1.8	4.3	3.0

*Low precision; no estimate reported.

N/A: Not applicable.

NOTE: "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.

[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥ 18.

[3] Retired, disabled, homemaker, student, or "other."

*Difference between 1994 and 1995 is statistically significant at the .05 level.

*Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 20. Percentages Reporting Past Month Use of Cigarettes, by Age Group and Demographic Characteristics: 1994 and 1995

Demographic Characteristic	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
TOTAL	18.9	20.2	34.6	35.3	32.4	34.7	27.9	27.2	28.6	28.8
RACE/ ETHNICITY										
White	22.0	22.9	38.5	38.6	33.8	37.3	27.5	27.0	29.4	29.7
Black	11.5	11.8	24.9	24.1	32.1	34.4	32.5	31.4	28.4	28.1
Hispanic	14.4	15.5	27.9	28.0	29.3	26.7	26.9	25.2	25.8	24.7
Other	7.1*	19.9	23.5*	38.8	17.3	16.7	24.2	*	20.5	23.5
SEX										
Male	19.6	20.8	37.1	38.1	35.4	37.0	31.3	29.5	31.5	31.0
Female	18.2	19.7	32.3	32.5	29.5	32.4	24.9	25.2	26.0	26.8
POPULATION DENSITY[1]										
Large Metro	16.4	17.8	33.0	31.9	30.7	31.1	25.4	26.4	26.6	27.2
Small Metro	21.3	20.2	38.8	35.7	31.7	36.5	28.5	24.6	29.6	27.6
Nonmetro	19.7*	24.0	32.5*	41.3	38.5	40.0	31.5	32.0	31.3	33.4
REGION										
Northeast	17.8	18.3	32.0	38.5	29.1	32.0	28.3	26.3	27.9	28.0
North Central	20.2	23.6	38.6	40.3	35.8	36.5	28.8	30.2	30.2	31.8
South	20.1	19.7	37.4	35.6	34.1	37.5	28.8	27.2	30.0	29.2
West	16.6	18.7	28.8	27.9	29.0	31.4	24.8	24.5	25.2	25.7
ADULT EDUCATION[2]										
<High School	N/A	N/A	46.1	51.2	55.2	54.9	32.2	29.4	37.5	36.5
High School Grad	N/A	N/A	36.9	38.6	39.3	40.5	33.4	32.3	35.1	34.8
Some College	N/A	N/A	31.8	27.8	29.4	31.8	28.5	31.5	29.3	30.8
College Graduate	N/A	N/A	17.2	22.0	15.0*	19.2	16.0	15.2	15.9	16.7
CURRENT EMPLOYMENT[2]										
Full-time	N/A	N/A	38.2	37.2	31.5	33.6	30.8	30.5	32.0	32.2
Part-time	N/A	N/A	28.7	30.9	26.8	33.2	23.9	25.7	25.6	28.5
Unemployed	N/A	N/A	45.0	48.6	43.8	51.3	46.5	38.6	45.4	44.7
Other[3]	N/A	N/A	29.5	30.5	35.9	34.2	23.9	22.4	25.7	24.3

*Low precision; no estimate reported.

N/A: Not applicable.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.

[2] Data on adult education and current employment not shown for persons aged 12-17. Estimates for both adult education and current employment are for persons aged ≥ 18.

[3] Retired, disabled, homemaker, student, or "other."

*Difference between 1994 and 1995 is statistically significant at the .05 level.

**Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 21. Percentages Reporting Lifetime, Past Year, and Past Month Use of Any Illicit Drug, by Detailed Age Categories: 1994 and 1995

Age Group	TIME PERIOD					
	Lifetime		Past Year		Past Month	
	1994	1995	1994	1995	1994	1995
Total	34.4	34.2	10.8	10.7	6.0	6.1
12-17 Years Old	20.3	22.2	15.5[a]	18.0	8.2[b]	10.9
12-13	9.4	9.1	6.8	6.9	3.8	4.5
14-15	20.0[a]	23.9	15.2[a]	19.4	6.9[b]	12.7
16-17	32.8	34.2	25.5	28.3	14.5	15.6
18-25 Years Old	46.3	45.8	24.6	25.5	13.3	14.2
18-20	40.7	42.4	28.8	30.5	15.5	18.0
21-25	49.8	47.8	22.0	22.8	12.0	12.1
26-34 Years Old	56.1	54.8	14.8	14.6	8.5	8.3
26-29	53.6	53.3	15.4	15.4	8.7	8.6
30-34	57.9	55.9	14.4	14.0	8.4	8.1
35 Years and Older	27.7	27.9	5.7	5.0	3.2	2.8
35-39	58.4	55.4	14.4	11.6	7.7	6.6
40-44	52.4	48.5	9.1	8.9	5.0	4.4
45-49	35.8	32.5	6.3	5.3	3.4	2.5
≥50	7.9	11.5	1.5	1.6	1.1	1.1

*Low precision, no estimate reported.

NOTE: Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[a]Difference between 1994 and 1995 is statistically significant at the .05 level.

[b]Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

106

107

Table 22. Percentages Reporting Lifetime, Past Year, and Past Month Use of Marijuana, by Detailed Age Categories: 1994 and 1995

Age Group	TIME PERIOD					
	Lifetime		Past Year		Past Month	
	1994	1995	1994	1995	1994	1995
Total	31.1	31.0	8.5	8.4	4.8	4.7
12-17 Years Old	13.6[b]	16.2	11.4[b]	14.2	6.0[b]	8.2
12-13	3.4	4.6	2.9	3.8	1.9	2.2
14-15	12.0[b]	16.6	10.6[b]	14.7	5.0[b]	9.7
16-17	26.7	28.1	21.7	24.5	11.8	13.0
18-25 Years Old	41.9	41.4	21.8	21.8	12.1	12.0
18-20	36.1	35.9	25.9	25.8	14.3	15.2
21-25	45.5	44.4	19.2	19.6	10.7	10.1
26-34 Years Old	52.7	51.8	11.5	11.8	6.9	6.7
26-29	49.3	49.9	12.0	12.6	7.1	7.2
30-34	55.2	53.1	11.1	11.1	6.7	6.4
35 Years and Older	25.4	25.3	4.1	3.4	2.3	1.8
35-39	54.7	52.8	10.6	8.1	6.0	4.6
40-44	49.4	45.8	6.3	6.1	3.5	3.3
45-49	33.1	30.6	5.4	3.5	2.9	1.9
≥50	6.5	8.8	0.8	1.0	0.6	0.4

*Low precision; no estimate reported.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[a]Difference between 1994 and 1995 is statistically significant at the .05 level.
[b]Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 23. Percentages Reporting Lifetime, Past Year, and Past Month Use of Cocaine, by Detailed Age Categories: 1994 and 1995

Age Group	TIME PERIOD					
	Lifetime		Past Year		Past Month	
	1994	1995	1994	1995	1994	1995
Total	10.4	10.3	1.7	1.7	0.7	0.7
12-17 Years Old	1.7	2.0	1.1	1.7	0.3[a]	0.8
12-13	0.6	0.7	0.5	0.7	0.2	0.7
14-15	1.7	2.0	1.0	1.7	0.3	0.9
16-17	2.8	3.4	1.8	2.5	0.5	0.7
18-25 Years Old	12.1[a]	9.8	3.6	4.3	1.2	1.3
18-20	7.1	7.9	3.6	4.8	1.3	1.4
21-25	15.2[b]	10.8	3.6	4.1	1.2	1.2
26-34 Years Old	23.0	21.6	3.5	3.1	1.3	1.2
26-29	20.9	18.0	3.9	3.1	1.6	0.9
30-34	24.4	24.1	3.2	3.0	1.1	1.3
35 Years and Older	7.9	8.6	0.9	0.8	0.4	0.4
35-39	23.1	23.4	2.7	2.5	0.9	1.2
40-44	14.8	18.4	1.4	0.9	0.9	0.5
45-49	6.4	5.8	0.7	1.0	0.4	0.4
≥50	1.0	1.5	0.2	0.1	*	0.1

*Low precision; no estimate reported.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[a]Difference between 1994 and 1995 is statistically significant at the .05 level.
[b]Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 24. Percentages Reporting Past Month Alcohol Use, Past Month "Binge" Alcohol Use, and Past Month Heavy Alcohol Use, by Detailed Age Categories: 1994 and 1995

Age Group	LEVEL OF ALCOHOL USE IN PAST MONTH					
	Any Alcohol Use		"Binge" Alcohol Use		Heavy Alcohol Use	
	1994	1995	1994	1995	1994	1995
Total	53.9	52.2	16.5	15.8	6.2	5.5
12-17 Years Old	21.6	21.1	8.3	7.9	2.5	2.8
12-13	8.9	8.4	1.8	1.6	0.3	0.4
14-15	21.6	21.3	7.6	7.8	2.6	2.8
16-17	35.7	34.1	16.4	14.7	4.9	5.3
18-25 Years Old	63.1	61.3	33.6	29.9	13.2	12.0
18-20	54.6	52.1	31.8	27.6	14.5	11.8
21-25	68.3	66.5	34.8	31.2	12.4	12.1
26-34 Years Old	65.3	63.0	24.0	24.0	8.0	7.9
26-29	64.9	64.9	25.8	27.1	8.9	9.3
30-34	65.6[a]	61.7	22.7	21.8	7.3	6.9
35 Years and Older	54.1	52.6	11.8	11.8	4.8	3.9
35-39	65.0	63.3	18.9	19.4	7.3	6.3
40-44	60.1	61.1	15.5	17.7	4.7	5.0
45-49	60.4	54.8	14.3	13.3	6.2	6.1
≥50	47.0	46.0	7.7	7.2	3.7	2.2

*Low precision; no estimate reported.

NOTE: "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[a]Difference between 1994 and 1995 is statistically significant at the .05 level.
[b]Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 25. Percentages Reporting Lifetime, Past Year, and Past Month Use of Cigarettes, by Detailed Age Categories: 1994 and 1995

	TIME PERIOD					
	Lifetime		Past Year		Past Month	
Age Group	1994	1995	1994	1995	1994	1995
Total	73.3	71.8	31.7	32.0	28.6	28.8
12-17 Years Old	37.6	38.1	24.5	26.6	18.9	20.2
12-13	22.1	20.2	13.7	13.6	9.4	10.7
14-15	37.2[a]	42.6	25.2	29.2	19.7	20.5
16-17	55.1	52.1	35.8	37.4	28.6	30.1
18-25 Years Old	69.1	67.7	41.1	42.5	34.6	35.3
18-20	67.0	65.2	44.3	45.1	36.4	36.9
21-25	70.3	69.2	39.1	41.0	33.5	34.4
26-34 Years Old	75.9	75.8	36.0	38.4	32.4	34.7
26-29	72.5	74.4	34.7[a]	39.0	30.7[a]	34.8
30-34	78.4	76.8	37.0	38.0	33.6	34.5
35 Years and Older	79.8	77.5	29.6	28.7	27.9	27.2
35-39	81.7[a]	77.0	37.8	41.0	35.2	38.6
40-44	79.5	80.9	34.2	33.9	32.0	32.3
45-49	83.8	80.9	34.9	31.2	31.8	29.4
≥50	78.3	75.9	24.2	22.5	23.2	21.3

*Low precision; no estimate reported.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[a]Difference between 1994 and 1995 is statistically significant at the .05 level.
[b]Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

114

115

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Table 26A. Estimated Numbers (in Thousands) of Lifetime, Past Year, and Past Month Users of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population of Females Aged 15 to 44, by Pregnancy Status and Parental Status: Annual Averages Based on 1994 and 1995 Samples

	Females Aged 15-44											
	Used in Lifetime				Used in Past Year				Used in Past Month			
		Not Pregnant				Not Pregnant				Not Pregnant		
Drug	Pregnant	No Children	Has Child Aged <2[1]	All Children Aged ≥2[1]	Pregnant	No Children	Has Child Aged <2[1]	All Children Aged ≥2[1]	Pregnant	No Children	Has Child Aged <2[1]	Al Chil Age
Any Illicit Drug[2]	1,222	11,303	3,131	10,998	269	4,731	673	2,412	62	2,362	389	
Marijuana and Hashish	1,133	10,189	2,917	10,183	227	3,839	471	1,563	40	1,932	302	
Cocaine	381	3,327	1,024	3,249	59	661	82	380	11	238	27	
Crack	89	520	182	432	26	216	32	108	11	87	11	
Inhalants	125	2,030	312	1,051	25	546	23	51	9	146	12	
Hallucinogens	289	3,186	794	2,418	32	808	53	120	4	341	18	
PCP	85	783	247	932	6	82	2	7	*	13	2	
LSD	185	2,439	656	1,846	20	533	32	25	*	143	7	
Heroin	20	240	19	216	6	73	3	26	3	26	3	
Nonmedical Use of Any Psychotherapeutic[3]	370	3,302	815	3,299	59	1,291	253	927	28	425	89	
Stimulants	173	1,279	305	1,391	21	342	60	178	5	133	24	
Sedatives	79	620	192	808	*	124	15	93	*	58	6	
Tranquilizers	144	1,285	356	1,319	37	404	100	346	8	106	32	
Analgesics	202	2,045	454	1,870	29	853	184	591	16	230	59	
Any Illicit Drug other than Marijuana[2]	656	6,482	1,727	5,548	132	2,341	357	1,279	48	982	138	
Alcohol	2,365	21,085	5,730	20,139	1,746	18,749	4,497	16,357	581	14,649	3,238	1
"Binge" Alcohol Use[4]	--	--	--	--	--	--	--	--	77	4,570	583	
Heavy Alcohol Use[4]	--	--	--	--	--	--	--	--	9	1,302	120	
Cigarettes	1,895	17,074	4,656	16,968	833	9,399	2,071	8,135	587	8,078	1,868	
Smokeless Tobacco	132	1,931	351	861	20	266	14	93	4	133	4	

*Low precision; no estimate reported.
-- Not available.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] The respondent and the child(ren) both (all) reside in the same household.
[2] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.
[3] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter drugs.
[4] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 26B. Percentages Reporting Lifetime, Past Year, and Past Month Use of Illicit Drugs, Alcohol, and Tobacco in the U.S. Population of Females Aged 15 to 44, by Pregnancy Status and Parental Status: Annual Averages Based on 1994 and 1995 Samples

	Females Aged 15-44											
	Used in Lifetime				Used in Past Year				Used in Past Month			
		Not Pregnant				Not Pregnant				Not Pregnant		
Drug	Pregnant	No Children	Has Child Aged <2[1]	All Children Aged ≥2[1]	Pregnant	No Children	Has Child Aged <2[1]	All Children Aged ≥2[1]	Pregnant	No Children	Has Child Aged <2[1]	Al Chil Age
Any Illicit Drug[2]	44.8	44.3	44.5	48.4	9.9	18.6	9.6	10.6	2.3	9.3	5.5	
Marijuana and Hashish	41.5	40.0	41.5	44.8	8.3	15.1	6.7	6.9	1.5	7.6	4.3	
Cocaine	13.9	13.0	14.6	14.3	2.2	2.6	1.2	1.7	0.4	0.9	0.4	
Crack	3.2	2.0	2.6	1.9	0.9	0.8	0.5	0.5	0.4	0.3	0.2	
Inhalants	4.6	8.0	4.4	4.6	0.9	2.1	0.3	0.2	0.3	0.6	0.2	
Hallucinogens	10.6	12.5	11.3	10.6	1.2	3.2	0.7	0.5	0.2	1.3	0.3	
PCP	3.1	3.1	3.5	4.1	0.2	0.3	0.0	0.0	*	0.0	0.0	
LSD	6.8	9.6	9.3	8.1	0.7	2.1	0.5	0.1	*	0.6	0.1	
Heroin	0.7	0.9	0.3	0.9	0.2	0.3	0.0	0.1	0.1	0.1	0.0	
Nonmedical Use of Any Psychotherapeutic[3]	13.6	13.0	11.6	14.5	2.2	5.1	3.6	4.1	1.0	1.7	1.3	
Stimulants	6.4	5.0	4.3	6.1	0.8	1.3	0.8	0.8	0.2	0.5	0.3	
Sedatives	2.9	2.4	2.7	3.6	*	0.5	0.2	0.4	*	0.2	0.1	
Tranquilizers	5.3	5.0	5.1	5.8	1.3	1.6	1.4	1.5	0.3	0.4	0.5	
Analgesics	7.4	8.0	6.5	8.2	1.1	3.3	2.6	2.6	0.6	0.9	0.8	
Any Illicit Drug other than Marijuana[2]	24.0	25.4	24.5	24.4	4.8	9.2	5.1	5.6	1.8	3.9	2.0	
Alcohol	86.7	82.7	81.5	88.7	64.0	73.5	63.9	72.0	21.3	57.5	46.0	
"Binge" Alcohol Use[4]	--	--	--	--	--	--	--	--	2.9	18.5	8.6	
Heavy Alcohol Use[4]	--	--	--	--	--	--	--	--	0.3	5.3	1.8	
Cigarettes	69.5	67.0	66.2	74.7	30.5	36.9	29.4	35.8	21.5	31.7	26.6	
Smokeless Tobacco	4.9	7.6	5.0	3.8	0.7	1.0	0.2	0.4	0.2	0.5	0.1	

*Low precision; no estimate reported.
-- Not available.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1] The respondent and the child(ren) both (all) reside in the same household.
[2] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.
[3] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter drugs.
[4] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 27. Percentages Reporting Lifetime, Past Year, and Past Month Use of Any Illicit Drug in the U.S. Population of Females Aged 15 to 44, by Pregnancy Status and Demographic Characteristics: Annual Averages Based on 1994 and 1995 Samples

Demographic Characteristics	TIME PERIOD					
	Lifetime		Past Year		Past Month	
	Pregnant	Not Pregnant	Pregnant	Not Pregnant	Pregnant	Not Pregnant
TOTAL	44.8	46.0	9.9	14.1	2.3	7.2
AGE						
15-25	43.0	38.7	16.5	22.2	3.5	11.6
26-44	46.0	49.6	5.2	10.3	1.4	5.0
RACE/ETHNICITY						
White	51.3	53.2	10.3	15.7	2.3	7.8
Black	37.8	32.6	9.1	13.0	2.1	7.7
Hispanic	25.7	25.1	7.2	8.9	1.4	4.3
MARITAL STATUS						
Married	43.2	46.7	6.5	8.3	1.2	4.1
Not Married	48.6	45.3	17.8	20.2	4.9	10.4
Never Married	47.2	41.6	19.6	21.2	5.2	10.7
Divorced, Separated	*	56.7	*	17.4	*	9.4
POPULATION DENSITY[1]						
Large Metro	40.3	45.8	7.2	13.9	2.0	7.2
Small Metro	53.3	48.7	12.6	14.6	1.7	7.4
Nonmetro	39.7	42.8	10.7	14.0	3.8	6.8
PARENTAL STATUS						
No Children	46.0	44.3	14.5	18.6	3.1	9.3
Has Child Aged <2[2]	45.8	44.5	7.1	9.6	1.3	5.5
All Children Aged ≥2[2]	43.2	48.4	6.2	10.6	1.8	5.3
TRIMESTER[3]						
First	43.5	N/A	11.0	N/A	5.2	N/A
Second	48.0	N/A	12.9	N/A	1.7	N/A
Third	41.1	N/A	5.7	N/A	0.5	N/A
ADULT EDUCATION[4]						
<High School	48.4	42.6	13.0	16.4	3.2	10.3
High School Grad	45.8	46.2	8.7	13.8	3.0	7.2
Some College	37.2	49.8	6.4	13.1	1.4	5.8
College Graduate	45.0	51.0	5.6	10.5	*	4.3

*Low precision; no estimate reported.
N/A Not applicable.
NOTE: Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.
NOTE: The sum of the pregnant and not pregnant females aged 15-44 is less than the total of all females aged 15-44 because of item nonresponse to the pregnancy question.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.
[2] The respondent and the child(ren) both (all) reside in the same household.
[3] Trimester not reported by all pregnant respondents.
[4] Data on adult education not shown for persons aged 12-17. Estimates for adult education are for persons aged 18 to 44.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 28. Percentages Reporting Past Month Alcohol Use, Past Month "Binge" Alcohol Use, and Past Month Heavy Alcohol Use in the U.S. Population of Females Aged 15 to 44, by Pregnancy Status and Demographic Characteristics: Annual Averages Based on 1994 and 1995 Samples

Demographic Characteristics	LEVEL OF ALCOHOL USE IN PAST MONTH					
	Any Alcohol Use		"Binge" Alcohol Use		Heavy Alcohol Use	
	Pregnant	Not Pregnant	Pregnant	Not Pregnant	Pregnant	Not Pregnant
TOTAL	21.3	55.1	2.9	13.7	0.3	3.6
AGE						
15-25	17.7	50.1	2.1	18.3	0.3	5.2
26-44	23.8	57.5	3.5	11.5	0.3	2.8
RACE/ETHNICITY						
White	24.4	60.6	2.7	15.8	*	4.0
Black	14.6	45.0	2.3	8.2	*	2.6
Hispanic	11.9	39.1	2.1	9.0	*	2.5
MARITAL STATUS						
Married	20.1	54.9	2.7	8.9	*	1.6
Not Married	24.3	55.3	3.5	18.7	0.8	5.6
Never Married	22.2	53.4	2.9	18.9	0.8	5.6
Divorced, Separated	*	61.2	*	18.2	*	5.5
POPULATION DENSITY[1]						
Large Metro	25.9	56.1	3.3	13.5	0.3	3.3
Small Metro	17.6	56.1	2.4	14.1	*	3.7
Nonmetro	18.5	51.8	3.0	13.5	*	3.9
PARENTAL STATUS						
No Children	23.4	57.5	2.4	18.5	*	5.3
Has Child Aged <2[2]	16.8	46.0	1.3	8.6	*	1.8
All Children Aged ≥2[2]	20.8	55.3	4.1	9.9	0.4	2.2
TRIMESTER[3]						
First	29.7	N/A	6.4	N/A	0.9	N/A
Second	11.2	N/A	2.4	N/A	*	N/A
Third	16.9	N/A	*	N/A	*	N/A
ADULT EDUCATION[4]						
<High School	20.7	46.7	4.5	16.5	1.2	5.7
High School Grad	19.1	54.3	1.2	14.2	*	3.6
Some College	23.9	59.9	*	15.0	*	3.9
College Graduate	22.0	66.3	*	11.1	*	2.1

*Low precision; no estimate reported.
N/A: Not applicable.
NOTE: "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.
NOTE: The sum of the pregnant and not pregnant females aged 15-44 is less than the total of all females aged 15-44 because of item nonresponse to the pregnancy question.

[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.
[2] The respondent and the child(ren) both (all) reside in the same household.
[3] Trimester not reported by all pregnant respondents.
[4] Data on adult education not shown for persons aged 12-17. Estimates for adult education are for persons aged 18 to 44.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

122

123

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Table 29. Percentages Reporting Lifetime, Past Year, and Past Month Use of Cigarettes in the U.S. Population of Females Aged 15 to 44, by Pregnancy Status and Demographic Characteristics: Annual Averages Based on 1994 and 1995 Samples

Demographic Characteristics	TIME PERIOD					
	Lifetime		Past Year		Past Month	
	Pregnant	Not Pregnant	Pregnant	Not Pregnant	Pregnant	Not Pregnant
TOTAL	69.5	70.1	30.5	35.5	21.5	31.8
AGE						
15-25	66.7	60.4	42.1	37.4	28.1	30.9
26-44	71.4	74.7	22.4	34.6	16.8	32.2
RACE/ETHNICITY						
White	78.5	76.7	33.4	38.7	23.5	34.6
Black	55.2	58.1	28.2	31.2	21.9	28.9
Hispanic	47.4	51.5	20.2	25.3	13.9	21.7
MARITAL STATUS						
Married	70.1	72.9	25.4	29.8	17.0	27.2
Not Married	67.9	67.1	42.6	41.4	32.2	36.5
Never Married	66.7	62.5	42.4	37.7	31.5	32.2
Divorced, Separated	*	80.7	*	52.4	*	49.8
POPULATION DENSITY[1]						
Large Metro	65.5	67.9	23.9	33.1	15.5	29.5
Small Metro	77.4	71.3	36.6	36.1	26.0	32.4
Nonmetro	64.5	72.5	33.6	39.3	25.8	35.5
PARENTAL STATUS						
No Children	66.0	67.0	32.6	36.9	20.7	31.7
Has Child Aged <2[2]	66.4	66.2	34.0	29.4	26.3	26.6
All Children Aged ≥2[2]	74.1	74.7	27.1	35.8	20.5	33.5
TRIMESTER[3]						
First	66.5	N/A	40.4	N/A	31.0	N/A
Second	70.4	N/A	30.9	N/A	20.2	N/A
Third	67.4	N/A	24.1	N/A	16.8	N/A
ADULT EDUCATION[4]						
<High School	68.0	70.3	49.9	53.2	44.9	50.7
High School Grad	68.0	74.2	31.0	39.6	23.8	37.1
Some College	72.7	74.3	27.7	35.2	13.2	30.2
College Graduate	67.4	68.3	12.5	20.1	6.6	16.9

*Low precision; no estimate reported.
N/A: Not applicable.
NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.
NOTE: The sum of the pregnant and not pregnant females aged 15-44 is less than the total of all females aged 15-44 because of item nonresponse to the pregnancy question.
[1] Population density is based on 1990 MSA classifications and their 1990 Census of Population counts.
[2] The respondent and the child(ren) both (all) reside in the same household.
[3] Trimester not reported by all pregnant respondents.
[4] Data on adult education not shown for persons aged 12-17. Estimates for adult education are for persons aged 18 to 44.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

124

125

Table 30. Percentages of Past Month Users of Cigarettes or Alcohol in the U.S. Population Aged 12 and Older Reporting Past Month Use of Illicit Drugs, Alcohol, and Tobacco, by Levels of Past Month Cigarette and Alcohol Use: 1995

	USE OF CIGARETTES OR ALCOHOL IN PAST MONTH					
	Cigarette Use In Past Month		Level of Alcohol Use In Past Month			
Drug	Any Use	No Use	Heavy Use[3]	"Binge" Use But Not Heavy Use[3]	Use But Not "Binge" Use[3]	No Use
Any Illicit Drug[1]	13.6	3.0	24.9	17.9	5.5	1.9
Marijuana and Hashish	11.2	2.0	22.1	15.1	4.1	0.9
Cocaine	1.7	0.3	4.2	1.8	0.6	0.1
Crack	0.5	0.1	1.2	0.3	0.2	0.1
Inhalants	1.0	0.2	1.7	1.1	0.3	0.3
Hallucinogens	1.6	0.3	3.8	3.0	0.4	0.1
PCP	0.0	0.0	0.2	*	0.0	0.0
LSD	0.7	0.1	2.2	0.7	0.2	0.0
Heroin	0.2	0.1	0.3	0.1	0.0	0.1
Nonmedical Use of Any Psychotherapeutic[2]	2.7	0.6	3.9	2.3	1.3	0.7
Stimulants	0.9	0.2	1.4	0.7	0.4	0.1
Sedatives	0.4	0.1	0.4	0.1	0.2	0.2
Tranquilizers	1.0	0.1	1.4	0.8	0.4	0.1
Analgesics	1.3	0.3	1.9	1.2	0.4	0.5
Any Illicit Drug Other than Marijuana[1]	5.8	1.3	10.8	7.0	2.2	1.2
Alcohol	66.4	46.5	N/A	N/A	N/A	N/A
"Binge" Alcohol Use[3]	30.2	10.1	N/A	N/A	N/A	N/A
Heavy Alcohol Use[3]	12.6	2.7	N/A	N/A	N/A	N/A
Cigarettes	N/A	N/A	64.5	48.7	28.2	20.3
Smokeless Tobacco	4.2	2.9	9.0	6.5	3.0	2.3

*Low precision; no estimate reported.

N/A: Not applicable.

NOTE: Estimates for 1995 are derived from the new-version questionnaire.

[1] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

Source: SAMHSA, Office Of Applied Studies, National Household Survey on Drug Abuse, 1995.

126

127

Table 31. Percentages of Past Month Users of Cigarettes or Alcohol in the U.S. Population Aged 12 to 17 Reporting Past Month Use of Illicit Drugs, Alcohol, and Tobacco, by Levels of Past Month Cigarette and Alcohol Use: 1995

	USE OF CIGARETTES OR ALCOHOL IN PAST MONTH					
	Cigarette Use In Past Month		Level of Alcohol Use In Past Month			
Drug	Any Use	No Use	Heavy Use[3]	"Binge" Use But Not Heavy Use[3]	Use But Not "Binge" Use[3]	No Use
Any Illicit Drug[1]	35.3	4.7	54.9	49.1	27.0	4.3
Marijuana and Hashish	29.2	2.9	*	43.3	21.1	2.4
Cocaine	3.2	0.2	*	4.9	*	0.2
Crack	0.9	*	*	0.8	0.2	0.1
Inhalants	7.1	0.9	13.1	8.5	4.5	1.0
Hallucinogens	6.9	0.4	20.8	9.5	3.8	0.4
PCP	0.2	0.1	2.4	*	*	0.0
LSD	3.5	0.2	*	3.9	1.9	0.2
Heroin	0.9	0.0	*	*	0.2	0.2
Nonmedical Use of Any Psychotherapeutic[2]	4.3	0.9	6.6	4.2	2.9	1.0
Stimulants	1.7	0.2	*	1.4	0.6	0.3
Sedatives	1.0	0.1	*	*	0.9	0.2
Tranquilizers	0.6	0.1	*	*	0.8	0.1
Analgesics	3.1	0.8	4.9	2.8	2.3	0.9
Any Illicit Drug Other than Marijuana[1]	15.8	2.1	*	19.7	10.0	2.3
Alcohol	54.6	12.6	N/A	N/A	N/A	N/A
"Binge" Alcohol Use[3]	27.0	3.2	N/A	N/A	N/A	N/A
Heavy Alcohol Use[3]	10.2	0.9	N/A	N/A	N/A	N/A
Cigarettes	N/A	N/A	73.1	64.7	43.8	11.6
Smokeless Tobacco	9.2	1.2	20.3	13.0	4.6	1.3

*Low precision; no estimate reported.

N/A Not applicable.

NOTE: Estimates for 1995 are derived from the new-version questionnaire.

[1] Any Illicit Drug indicates use at least once of marijuana or hashish, cocaine (including crack), inhalants, hallucinogens (including PCP and LSD), heroin, or any prescription-type psychotherapeutic used nonmedically. Any Illicit Drug Other than Marijuana indicates use at least once of any of these listed drugs, regardless of marijuana use; marijuana users who also have used any of the other listed drugs are included.

[2] Nonmedical use of any prescription-type stimulant, sedative, tranquilizer, or analgesic; does not include over-the-counter-drugs.

[3] "Binge" Alcohol Use is defined as drinking five or more drinks on the same occasion on at least one day in the past 30 days. By "occasion" is meant at the same time or within a couple hours of each other. Heavy Alcohol Use is defined as drinking five or more drinks on the same occasion on each of five or more days in the past 30 days; all Heavy Alcohol Users are also "Binge" Alcohol Users.

Source: SAMHSA, Office Of Applied Studies, National Household Survey on Drug Abuse, 1995.

Table 32. Estimated Numbers (in Thousands) of Lifetime Users of Specific Hallucinogens, Inhalants, Methamphetamine, Needles, and Heroin by Smoking or Sniffing/Snorting It in the U.S. Population Aged 12 and Older, By Age Group: 1994 and 1995

Drug or Method of Administration	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
Hallucinogens	875*	1,190	4,068	3,921	5,656	5,466	7,618*	9,553	18,217	20,129
PCP	214	356	705	829	1,966	1,641	3,026	3,892	5,911	6,718
LSD	736*	965	3,100	3,346	4,524	4,224	6,351	7,317	14,711	15,852
Peyote	69	121	391	276	743	734	2,225	3,133	3,429	4,264
Mescaline	91	82	537	512	1,428	1,291	3,889	4,918	5,944	6,802
Psilocybin (Mushrooms)	241	369	2,028	1,873	3,214	2,974	3,580*	5,252	9,063	10,468
"Ecstasy" (MDMA)	163	267	855	960	869	1,007	830	1,199	2,718	3,433
Inhalants	1,524	1,639	2,811	3,110	4,046[b]	3,132	3,797	4,135	12,178	12,016
Amyl Nitrite, "Poppers," Locker Room Odorizers, or "Rush"	188	143	841	832	2,425*	1,855	2,268	2,623	5,722	5,453
Correction Fluid, Degreaser, or Cleaning Fluid	340	365	366	475	307	140	199	449	1,211	1,429
Gasoline or Lighter Fluid	601	693	563	655	490	511	570	402	2,225	2,260
Glue, Shoe Polish, or Toluene	633	654	428*	704	497	570	610	778	2,167	2,706
Halothane, Ether, or Other Anesthetics	72	80	95	147	111	94	86	335	364	655
Lacquer Thinner or Other Paint Solvents	337	407	269	246	183	181	162	188	952	1,021
Lighter Gases (Butane, Propane)	233	335	184	276	34	93	109	33	560	737
Nitrous Oxide or "Whippets"	332	312	1,396	1,729	1,810[b]	1,166	1,204	1,450	4,742	4,656
Spray Paints	284*	468	182	257	182	163	217	193	865	1,082
Other Aerosol Sprays	301	332	276	303	239*	108	307	221	1,123	964
Methamphetamine	121	169	480	515	1,306	1,385	1,918	2,607	3,825	4,676
Needle Use[1]	54	88	238	190	712	743	1,575	1,703	2,580	2,723
Heroin	68	151	212	208	563	523	1,240	1,568	2,083	2,451
Smoke Heroin	32	101	78	144	212	263	368*	879	691[b]	1,387
Sniff or Snort Heroin	20	71	77	139	311	317	619	848	1,027	1,374

*Low precision; no estimate reported.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1]Refers to lifetime use of a needle to inject a drug that was not prescribed, or that was taken only for the experience or feeling it caused.

[a]Difference between 1994 and 1995 is statistically significant at the .05 level.

[b]Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 33. Percentages Reporting Lifetime Use of Specific Hallucinogens, Inhalants, Methamphetamine, Needles, and Heroin by Smoking or Sniffing/Snorting It in the U.S. Population Aged 12 and Older, by Age Group: 1994 and 1995

Drug or Method of Administration	AGE GROUP (Years)								Total	
	12-17		18-25		26-34		35 and Older			
	1994	1995	1994	1995	1994	1995	1994	1995	1994	1995
Hallucinogens	4.0[a]	5.4	14.5	14.1	15.5	15.2	6.2	7.6	8.7	9.5
PCP	1.0	1.6	2.5	3.0	5.4	4.6	2.5	3.1	2.8	3.2
LSD	3.4	4.3	11.1	12.0	12.4	11.7	5.2	5.8	7.0	7.5
Peyote	0.3	0.5	1.4	1.0	2.0	2.0	1.8	2.5	1.6	2.0
Mescaline	0.4	0.4	1.9	1.8	3.9	3.6	3.2	3.9	2.8	3.2
Psilocybin (Mushrooms)	1.1	1.7	7.2	6.7	8.8	8.3	2.9[a]	4.2	4.3	4.9
"Ecstasy" (MDMA)	0.8	1.2	3.1	3.5	2.4	2.8	0.7	1.0	1.3	1.6
Inhalants	7.0	7.4	10.0	11.2	11.1[b]	8.7	3.1	3.3	5.8	5.7
Amyl Nitrite, "Poppers," Locker Room Odorizers, or "Rush"	0.9	0.6	3.0	3.0	6.6[a]	5.2	1.8	2.1	2.7	2.6
Correction Fluid, Degreaser, or Cleaning Fluid	1.6	1.6	1.3	1.7	0.8	0.4	0.2	0.4	0.6	0.7
Gasoline or Lighter Fluid	2.8	3.1	2.0	2.4	1.3	1.4	0.5	0.3	1.1	1.1
Glue, Shoe Polish, or Toluene	2.9	2.9	1.5[a]	2.5	1.4	1.6	0.5	0.6	1.0	1.3
Halothane, Ether, or Other Anesthetics	0.3	0.4	0.3	0.5	0.3	0.3	0.1	0.3	0.2	0.3
Lacquer Thinner or Other Paint Solvents	1.5	1.8	1.0	0.9	0.5	0.5	0.1	0.1	0.5	0.5
Lighter Gases (Butane, Propane)	1.1	1.5	0.7	1.0	0.1	0.3	0.1	0.0	0.3	0.3
Nitrous Oxide or "Whippets"	1.5	1.4	5.0	6.2	4.9[b]	3.2	1.0	1.2	2.3	2.2
Spray Paints	1.3[a]	2.1	0.6	0.9	0.5	0.5	0.2	0.2	0.4	0.5
Other Aerosol Sprays	1.4	1.5	1.0	1.1	0.7[a]	0.3	0.2	0.2	0.5	0.5
Methamphetamine	0.6	0.8	1.7	1.9	3.6	3.8	1.6	2.1	1.8	2.2
Needle Use[1]	0.2	0.4	0.8	0.7	1.9	2.1	1.3	1.4	1.2	1.3
Heroin	0.3	0.7	0.8	0.7	1.5	1.5	1.0	1.2	1.0	1.2
Smoke Heroin	0.1	0.5	0.3	0.5	0.6	0.7	0.3[a]	0.7	0.3[b]	0.7
Sniff or Snort Heroin	0.1	0.3	0.3	0.5	0.9	0.9	0.5	0.7	0.5	0.6

*Low precision; no estimate reported.

NOTE: Estimates for 1994 and 1995 are derived from the new-version questionnaire.

[1]Refers to lifetime use of a needle to inject a drug that was not prescribed, or that was taken only for the experience or feeling it caused.

[a]Difference between 1994 and 1995 is statistically significant at the .05 level.

[b]Difference between 1994 and 1995 is statistically significant at the .01 level.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 34. Estimated Number (in Thousands) of Persons Who First Used Marijuana During Each Year 1962-1994, Their Mean Age at First Use, and Annual Age-Specific Rates of First Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1]		
			12-17	18-25	26-34
1962	102	*	0.4	4.4	0.4
1963	204	24.2	2.3	2.9	5.2
1964	283	19.0	4.4	7.4	1.9
1965	591	20.1	5.8	15.1	5.5
1966	779	19.7	10.5	21.5	0.4
1967	1429	20.3	14.7	43.0	0.9
1968	1460	20.0	15.5	41.5	*
1969	2447	19.7	34.8	60.1	*
1970	2905	19.0	38.9	71.6	12.5
1971	2826	19.1	43.8	60.1	19.9
1972	2721	17.7	46.2	67.3	4.5
1973	2942	17.8	59.9	61.1	7.9
1974	2810	18.5	55.8	55.6	7.8
1975	3188	18.9	69.3	55.2	10.8
1976	2690	18.5	59.2	51.9	10.3
1977	2910	18.5	68.7	54.8	7.3
1978	2974	17.6	81.0	52.4	8.6
1979	2629	17.6	65.2	58.4	4.0
1980	2631	18.7	60.5	60.3	7.1
1981	2083	17.8	56.3	41.0	4.4
1982	2099	17.7	59.9	39.8	6.7
1983	2050	17.5	56.2	42.3	2.7
1984	1978	20.9	47.9	37.2	5.6
1985	1805	17.2	53.2	40.5	1.6
1986	1943	21.4	50.6	44.6	1.8
1987	1933	17.8	49.9	49.7	2.4
1988	1499	17.4	39.9	39.7	1.5
1989	1409	17.6	38.2	33.3	4.0
1990	1410	17.3	38.0	38.7	0.9
1991	1399	17.2	38.0	35.7	0.9
1992	1737	17.5	47.9	41.7	0.7
1993	1909	16.9	56.5	44.2	1.0
1994[2]	2251	16.3	74.2	42.1	3.4

*Low precision, no estimate reported.
**Estimate rounds to zero.
[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:
(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.
(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)
(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.
Each person is also weighted by his/her sample weight.
[2] Estimated using 1995 data only.
Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 35. Estimated Number (in Thousands) of Persons Who First Used Cocaine During Each Year 1962-1994, Their Mean Age at First Use, and Annual Age-Specific Rates of First Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1]		
			12-17	18-25	26-34
1962	**	*	**	**	**
1963	*	*	0.7	**	**
1964	*	*	1.1	0.7	**
1965	*	*	**	0.3	**
1966	*	*	0.4	2.4	1.7
1967	*	*	0.2	0.1	**
1968	*	*	0.2	1.1	**
1969	136	18.9	1.0	3.7	0.5
1970	351	18.2	3.6	9.0	**
1971	313	20.4	3.7	5.2	1.7
1972	269	19.4	2.3	6.5	**
1973	584	20.3	4.6	13.5	2.1
1974	596	22.1	3.5	15.0	0.2
1975	922	21.4	4.5	21.4	5.8
1976	636	21.1	4.5	13.3	3.0
1977	972	21.0	5.5	23.6	3.5
1978	849	21.5	6.0	16.9	3.2
1979	1177	21.4	6.1	24.7	7.5
1980	1353	21.1	9.2	29.8	6.7
1981	1365	22.1	8.4	27.0	9.3
1982	1370	21.2	9.5	28.7	8.8
1983	1233	22.2	9.1	23.0	8.8
1984	1401	22.2	12.7	24.9	11.9
1985	1114	22.2	7.7	22.5	10.2
1986	1217	22.4	9.7	25.7	7.3
1987	1027	22.0	9.4	21.3	6.5
1988	787	21.1	6.9	17.7	4.6
1989	852	22.3	5.4	20.5	5.5
1990	654	23.3	5.8	13.3	4.8
1991	491	21.2	4.5	11.9	2.5
1992	451	20.0	6.8	9.2	2.1
1993	567	19.9	7.0	12.8	2.6
1994[2]	533	19.0	10.2	9.9	1.4

*Low precision; no estimate reported.
**Estimate rounds to zero.
[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:
(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.
(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)
(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.
Each person is also weighted by his/her sample weight.
[2] Estimated using 1995 data only.
Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 36. Estimated Number (in Thousands) of Persons Who First Used Any Inhalant During Each Year 1962-1994, Their Mean Age at First Use, and Annual Age-Specific Rates of First Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1] 12-17	18-25	26-34
1962	**	*	**	**	**
1963	*	*	1.1	2.0	**
1964	*	*	0.2	**	**
1965	161	15.1	2.8	3.4	**
1966	148	*	4.3	**	**
1967	108	*	4.5	0.1	**
1968	144	14.7	3.1	1.7	**
1969	143	16.4	4.6	1.1	**
1970	165	14.8	4.9	0.8	**
1971	193	17.0	3.8	2.8	**
1972	313	17.9	5.0	3.9	2.1
1973	275	16.7	5.3	4.0	0.4
1974	445	21.3	6.8	5.8	0.1
1975	305	17.1	6.3	4.4	**
1976	410	17.6	8.2	5.2	0.9
1977	500	17.8	9.8	5.6	0.5
1978	534	17.7	9.4	7.4	1.3
1979	396	17.9	8.6	4.6	1.3
1980	568	17.4	10.6	8.7	0.4
1981	485	20.0	6.7	6.1	2.8
1982	454	18.8	7.9	6.1	1.6
1983	504	19.9	7.2	6.5	1.5
1984	384	17.4	8.4	5.0	0.7
1985	349	16.1	9.0	4.8	**
1986	453	16.5	13.0	4.9	0.5
1987	359	16.6	9.2	4.6	0.4
1988	383	16.3	11.0	4.8	0.1
1989	411	17.3	11.4	4.3	1.1
1990	453	16.1	11.1	5.9	0.7
1991	428	15.2	11.2	4.8	0.1
1992	508	16.1	14.4	6.5	0.1
1993	701	16.3	21.5	8.3	0.5
1994[2]	666	16.4	22.2	6.9	**

*Low precision, no estimate reported.
**Estimate rounds to zero.
[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:
(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.
(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)
(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.
Each person is also weighted by his/her sample weight.
[2] Estimated using 1995 data only.
Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 37. Estimated Number (in Thousands) of Persons Who First Used Any Hallucinogen During Each Year 1962-1994, Their Mean Age at First Use, and Annual Age-Specific Rates of First Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1] 12-17	18-25	26-34
1962	**	*	**	**	**
1963	*	*	0.3	**	**
1964	*	*	1.1	0.5	**
1965	91	*	**	4.0	**
1966	103	*	1.6	2.8	**
1967	115	*	1.3	3.1	**
1968	405	21.2	3.2	9.4	2.5
1969	550	18.0	12.6	8.3	0.9
1970	907	18.2	10.1	24.0	0.5
1971	845	19.5	12.2	16.0	4.4
1972	623	17.6	10.4	12.5	0.1
1973	769	17.7	16.2	10.9	1.6
1974	542	18.5	8.7	9.1	2.2
1975	847	19.6	9.7	18.2	1.6
1976	874	17.5	15.6	15.5	0.7
1977	651	18.1	11.6	9.8	2.6
1978	691	20.5	11.9	9.8	1.7
1979	743	18.6	10.0	15.8	1.0
1980	725	19.4	10.9	12.5	3.3
1981	661	18.5	9.5	13.1	1.2
1982	699	22.0	8.2	13.7	0.9
1983	573	18.6	9.7	11.4	0.6
1984	530	18.8	10.8	7.3	2.3
1985	505	19.2	7.9	10.4	1.2
1986	618	18.7	12.1	10.8	1.9
1987	623	20.1	9.0	12.2	2.2
1988	640	21.9	8.4	12.6	1.8
1989	667	18.9	11.7	14.5	1.4
1990	576	18.4	11.8	11.9	0.8
1991	586	18.4	11.2	13.0	0.3
1992	678	17.9	15.3	12.9	1.0
1993	818	18.1	16.4	16.1	1.8
1994[2]	912	17.0	23.3	16.3	0.2

*Low precision; no estimate reported.
**Estimate rounds to zero.

[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:

(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.

(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)

(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.

Each person is also weighted by his/her sample weight.

[2] Estimated using 1995 data only.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 38. Estimated Number (in Thousands) of Persons Who First Used Heroin During Each Year 1962-1994, Their Mean Age at First Use, and Annual Age-Specific Rates of First Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1]		
			12-17	18-25	26-34
1962	*	*	**	**	0.3
1963	*	*	0.3	**	**
1964	**	*	**	**	**
1965	*	*	**	1.0	**
1966	*	*	**	0.9	**
1967	*	*	**	0.1	1.7
1968	*	*	0.5	0.4	**
1969	64	*	1.2	1.2	**
1970	177	*	0.8	5.6	**
1971	104	*	1.4	2.3	**
1972	90	17.5	1.3	1.8	**
1973	85	*	1.0	1.9	**
1974	116	24.2	0.4	1.7	2.0
1975	83	*	0.2	2.5	**
1976	40	19.9	0.3	0.8	0.3
1977	111	23.6	0.2	1.9	1.5
1978	39	18.3	0.2	1.0	**
1979	62	*	0.5	1.4	0.1
1980	73	18.7	0.4	1.4	0.3
1981	86	20.8	0.4	1.8	0.5
1982	44	21.1	0.3	0.8	0.3
1983	56	25.5	0.1	0.8	0.2
1984	81	26.4	0.2	0.8	1.0
1985	54	24.1	0.1	1.2	0.4
1986	83	19.1	1.9	1.0	0.2
1987	62	20.9	0.1	1.5	0.3
1988	72	22.4	0.3	1.3	0.4
1989	73	25.5	0.9	0.8	0.5
1990	46	25.4	0.1	0.7	0.6
1991	60	21.2	0.5	1.1	0.5
1992	29	19.2	0.6	0.3	0.2
1993	51	19.8	0.6	0.8	0.3
1994[2]	122	20.3	2.1	1.4	1.0

*Low precision; no estimate reported.

**Estimate rounds to zero.

[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:

(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.

(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)

(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.

Each person is also weighted by his/her sample weight.

[2] Estimated using 1995 data only.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 39. Estimated Number (in Thousands) of Persons Who First Used Alcohol During Each Year 1962-1993, Their Mean Age at First Use, and Annual Age-Specific Rates of First Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1]		
			12-17	18-25	26-34
1962	2403	18.6	56.2	127.4	88.7
1963	2326	17.4	56.7	133.6	17.9
1964	2819	18.8	45.6	202.6	25.0
1965	3362	18.0	66.6	202.9	*
1966	3791	17.5	63.2	235.6	65.1
1967	3670	17.6	75.9	214.3	32.3
1968	4051	18.2	80.3	229.8	*
1969	4291	18.0	85.3	249.6	*
1970	4530	17.4	94.6	293.1	42.1
1971	3809	17.3	78.4	247.3	46.3
1972	4610	16.8	110.9	263.0	31.8
1973	4530	16.8	103.4	278.9	32.9
1974	4142	17.4	98.8	239.5	44.4
1975	4474	17.2	108.2	290.9	22.3
1976	4050	16.4	110.4	236.5	15.7
1977	4432	17.5	114.0	261.7	31.1
1978	4431	17.1	121.1	246.6	40.0
1979	4004	17.0	117.8	236.4	28.0
1980	3883	17.5	111.0	247.7	29.4
1981	3666	16.6	111.8	233.0	24.7
1982	3663	17.2	115.1	203.8	42.1
1983	3725	16.7	120.9	223.9	31.1
1984	3689	17.1	124.6	208.2	26.6
1985	3414	16.5	126.4	194.6	24.5
1986	3657	16.8	124.7	231.6	28.4
1987	3151	17.4	110.5	188.4	23.0
1988	3433	16.6	119.8	208.7	23.8
1989	3214	16.0	126.7	166.6	19.3
1990	3579	16.5	134.8	209.6	16.2
1991	3329	16.2	124.8	203.7	22.5
1992	3852	16.2	154.2	224.1	26.2
1993[2]	4158	15.9	171.9	238.5	14.6

*Low precision; no estimate reported.
**Estimate rounds to zero.

[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:

(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.

(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)

(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.

Each person is also weighted by his/her sample weight.

[2] Estimated using 1995 data only.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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Table 40. Estimated Number (in Thousands) of Persons Who First Used A Cigarette During Each Year 1962-1993, Their Mean Age at First Use, and Annual Age-Specific Rates of First Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1]		
			12-17	18-25	26-34
1962	2539	15.4	99.2	110.7	17.8
1963	2608	14.7	110.9	73.6	7.5
1964	2801	15.2	94.5	120.5	3.5
1965	2985	16.3	96.1	111.8	33.4
1966	3203	16.7	92.8	158.1	17.6
1967	3395	15.0	129.1	111.2	0.5
1968	3270	15.3	108.2	118.4	*
1969	3246	15.5	102.7	128.7	*
1970	3495	16.7	109.0	126.6	*
1971	3626	15.2	124.8	113.5	13.7
1972	3892	15.3	126.0	107.6	32.5
1973	3611	15.2	128.4	83.1	14.6
1974	3780	15.0	139.1	87.6	10.7
1975	3614	15.4	133.6	91.2	5.4
1976	3305	15.4	119.5	80.6	5.5
1977	3366	15.8	127.7	89.5	12.2
1978	3182	15.4	115.4	80.6	7.3
1979	3027	15.5	118.2	81.2	5.0
1980	2891	15.4	109.2	77.4	9.0
1981	2815	15.7	112.1	64.8	9.4
1982	2848	15.4	103.0	72.7	14.5
1983	2657	15.0	106.1	65.1	3.9
1984	2508	15.5	90.8	64.8	10.0
1985	2991	15.5	114.9	81.2	12.0
1986	2766	15.8	101.3	85.2	8.7
1987	2533	16.2	96.8	68.6	7.7
1988	2626	15.5	109.2	66.8	9.4
1989	2564	17.0	101.6	60.5	8.9
1990	2716	15.5	111.2	69.4	8.4
1991	2636	16.0	108.1	68.6	11.0
1992	2722	15.5	124.3	65.6	7.0
1993[2]	3005	15.9	125.4	87.4	6.7

*Low precision; no estimate reported.
**Estimate rounds to zero.

[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:

(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.

(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)

(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.

Each person is also weighted by his/her sample weight.

[2] Estimated using 1995 data only.

Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

Table 41. Estimated Number (in Thousands) of Persons Who Began Daily Cigarette Use During Each Year 1962-1994, Their Mean Age at First Daily Use, and Annual Age-Specific Rates of First Daily Use (per 1000 Person-Years of Exposure), Based on 1994 and 1995 NHSDAs

YEAR	INITIATES (1000s)	MEAN AGE	AGE-SPECIFIC RATE OF FIRST USE[1]		
			12-17	18-25	26-34
1962	1705	17.7	56.6	139.3	*
1963	1362	19.1	40.3	94.2	*
1964	1248	17.6	31.5	101.5	4.4
1965	1731	17.9	38.1	136.6	*
1966	1635	17.4	45.2	103.5	6.8
1967	2052	19.2	48.8	129.2	23.6
1968	2125	17.7	51.8	150.3	3.2
1969	1925	17.8	48.2	123.5	*
1970	2030	17.9	46.7	130.8	11.6
1971	2222	18.2	59.2	123.4	7.9
1972	2117	18.5	52.6	107.8	36.1
1973	2263	18.4	56.6	108.2	38.9
1974	2578	18.9	79.5	99.4	34.6
1975	2023	18.6	54.6	99.6	11.5
1976	2199	18.0	63.9	103.2	17.8
1977	2251	18.5	66.7	105.4	12.9
1978	1961	17.8	65.4	86.0	12.6
1979	1908	18.2	54.9	100.3	10.6
1980	1787	18.5	54.3	90.3	13.9
1981	1762	19.5	54.9	80.6	14.2
1982	1536	18.4	48.9	69.9	19.8
1983	1476	18.1	45.4	67.5	16.0
1984	1600	18.4	55.1	73.7	13.5
1985	1545	19.2	52.7	72.9	6.5
1986	1430	17.8	53.0	70.0	8.6
1987	1411	18.4	47.9	68.2	12.3
1988	1306	18.3	49.4	55.6	15.5
1989	1470	19.1	59.7	55.3	8.7
1990	1588	18.9	60.7	68.3	20.2
1991	1416	17.8	64.0	51.1	11.4
1992	1617	18.4	65.6	60.9	12.7
1993	1589	19.1	61.8	59.1	11.5
1994[2]	1520	16.8	66.3	56.3	7.4

*Low precision; no estimate reported.
**Estimate rounds to zero.
[1] The numerator of each rate equals the number of persons who first used the drug in the year (times 1000). The denominator of each rate equals the number of persons who were exposed to risk of first use during the year, weighted by their estimated exposure time measured in years. For example, for the age group 12-17 in 1990, the denominator is the sum of three components:
(1) those persons 12-17 years old in 1990 who first used the drug in 1989 or earlier, times a weight of zero. The weight is zero since they had zero exposure to the risk of first use in 1990.
(2) those who first used the drug in 1990 times a weight of .5. The weight of .5 assumes that these people, on average, first used the drug at midyear and consequently have a half year of exposure (i.e. the first half of the year.)
(3) those who never used, or those who first used the drug in 1991 or later, times a weight of one. The weight of one assumes their exposure to the risk of first use during 1990 was for the whole year.
Each person is also weighted by his/her sample weight.
[2] Estimated using 1995 data only.
Source: SAMHSA, Office of Applied Studies, National Household Survey on Drug Abuse, 1994 and 1995.

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